"HIV in My Day" – Interview #91

July 11, 2019 Interviewee: Robert Saarikko (RS); Interviewer: Ben Klassen (BK)

Ben Klassen: So yeah, if you don't mind just stating your name, that would not be a bad start.

Robert Saarikko: Okay, my name is Robert Saarikko. I currently reside in Campbell River, British Columbia, and have done so for the last thirty-eight years. I was born and raised here, but returned in 1981.

BK: Great, that's a great start. Well, thanks so much for being not physically here but here on the phone, Robert. I'm really looking forward to talking with you this afternoon. Just to get started, could you tell me a little bit about how you first got involved in the gay community, or started engaging in gay life? That's a can of worms, I know.

RS: Well, yes. It all began when I was little boy that... Boys playing around together, sexually experimenting and such, together had a lot more meaning for me than it did with the other ones that I was playing around with. And that never really left my mind throughout my – growing up and into my teen years and such. My teen years were through the sixties into the very early seventies, and so at that time of course, even though Stonewall had occurred and things of that nature, in regular towns and cities, nothing much had changed. So, things were very, very private. And I did a little bit of—had a brief sexual relationship with a male friend in high school and I also had the very great blessing of having a couple of my teachers who arranged for me to meet a gay adult, sort of to—I never really did ask them their intention, I just assumed that it was to show me what it's like to be an adult gay man, I guess. I went to university, found it very, very disappointing, and dropped out.

And during that time, I got involved with Cold Mountain Institute which was on Cortes Island. And I refer to them as a human potential growth centre. It was sort of the rough and crude stuff of the 1970s, or early 1970s. So, it was like encounter groups, Gestalt, sensitivity awareness training, and then you also had some physical disciplines, so yoga and tai chi gong. But I did a workshop there and to sort of deal with my psycho-emotional self, try to find some comfort within myself, and then the following year, there was a long workshop during their rest time when it was only lightly inhabited that there was a week-long sex and identity workshop. And I attended that, that was the second one that they had ever put on and that was quite an eye opener. Not so much for me in a sense of learning of new things about myself in particular, but it was more in the sense of other people and other people expressing their sexuality, and also the many sort of boundaries and baggage that many people had, because there were people there who were survivors of sexual abuse and they were working on stuff which was really very dramatic and such. And then at the same time were-were having quote unquote healthy same-sex relationships with long term partners and such. So, from that time I-even though my sexual life was—I reviewed it as like, an open secret. I didn't overtly talk about it, but it also was not hidden entirely either. So, from there I moved along, and when I would go to Vancouver, I would start initially the exploration into the few gays clubs that existed then in the early seventies.

BK: And so, that was kind of your first formative experience I guess with other gay men, that encounter group on the island.

RS: Not exclusively, but yes, that would be sort of the major event. I mean, there are always incidental things that happen in our lives. I went—I only went to university from 1970 to '72 before I dropped out, and in that first year that I was there in '70, '71, my roommate and a couple of his buddies we were in downtown Vancouver-I was attending UBC-and we were downtown Vancouver on a Saturday night, I guess it was. And so we had - I can't even remember what we had been doing beforehand, it might've been to see a movie or such, but on the way back to catch a bus home, the boys, said, "Oh, let's go into this pub. I heard it's really, really quite something." Well, it was the Castle Pub and it was before the rebuild and of course I knew the reputation of the Castle Pub even though I had not yet been in, because I was just turning legal and... I wasn't all that caught up with alcohol at that point in my life, and it really wasn't important for me to be in a bar even though I understood that it was a primarily gay pub. So needless to say, we went in. And as we walked through this very smoky atmosphere, because smoking was still very, very prevalent, and we're walking along, and I hear somebody call out, "My boys." And I just go, oh my god. And I turn and it's this young, like early twenties, French Canadian, French teacher from Campbell River and I had just met him briefly. And he thought he'd made this great and wonderful discovery, I was-I could've crawled into a snail shell at that moment, because I certainly wasn't out with my roommate or his buddies. And it was-it was all—I know what I said was, "Oh, it's this guy." I just said exactly who he was, and so it was just one of those moments, and I've watched other people have those moments as well in the course of their life. But you know, in hindsight of course, it's very amusing, at the time that it happened my heart was in my throat. But nothing negative came from it, coming my way. And I had a pretty good roommate.

BK: Yeah, it's like worlds colliding in that moment, I imagine.

RS: Oh yes.

BK: We all have those moments.

RS: Oh yes. With previous partners and all of those sorts of things. But so, through the—I lived in Vancouver off and on, I think I moved to Vancouver about four times in the seventies, always coming back to Campbell River in the between times, and every time I moved back. I did give university another try in I think it was 1977, or something like that. And I have been studying on my own, eastern philosophy and I returned in the Asian studies department and I found it a very frustrating experience because I had studied too much. And so, I ended up dropping out again, because I wasn't getting anything from it. But every time I moved back to Vancouver, I became much more the sexual creature realized. And—and to the point of probably, I guess in later terminologies, would be a sexual experience addict, and as one of the writers from the sixties and before, John Rechy, whose book was *Numbers*, and in that sense, that's kind of, although I wasn't counting numbers, that was sort of like, in my activity level, it was basically what was occurring. I looked for a lot satisfaction in and around sex. I was out to the clubs, bars and eventually the baths, the baths became in the late, late '70s, I was – prior to that, I was

intimidated to go. And then one friend, so, oh well, I'll—"If you're interested, I'll take you." And it was uh, really quite like a duck to water. And so, so began the libidinous side of my life.

Now, one thing that I realized, you know, it didn't matter how many people I had got off with the previous day or even some of the interactions concurrent with it, I realized that I always woke up feeling empty. And truly unsatisfied. There was a level of intimacy and/or connection that was not met in encounters, and it left me wanting more, or something else, and I never did actually find that in relationship. There were a couple of men that I was very interested in, one turned out to be too fearful to walk towards me because he was, I think an alcoholic, and I was afraid because I had come from a family where alcoholism is strongly present. I knew not to go towards that, and then later, another individual who from his side, his timing was not right that he had left a relationship and was not ready to commit to another one. So, in that time of 1979, 1980, and then pushing to the end of 1980, I was a probably six nights a week - I worked an afternoon shift in a bistro on Robson Street. And so after work we would go out and I would come home sometime, you know between four and six in the morning, and sleep for a few hours and get up and go to work. And that was quite a constant lifestyle. Fortunately, Vancouver wasn't expensive in those days, because I was you know, probably like in that sense kind of like working poor. Because I wasn't wage staff, I was kitchen staff, and tips didn't come back to the kitchen. And so, I was just living on wages and wages weren't great. But it was enough that, other than the odd time, it was enough to just go out and have a few drinks, and the rest of the time was spent on the dance floor or whatever. But of course the tubs cost a lot, you know, in the sense that if you went multiple times a week. But in order to maintain that lifestyle, of course, it became the priority of, you know, what is it that you nurture? And I nurtured my lifestyle, so that's what I did.

Sometime in late 1980, and it would be after this second fellow who decided that he wasn't ready for relationship, that it was too soon to the prior one and such, I was having just these feelings of I've had enough or I've done enough of this. And it always reminds me of a Jesse Winchester song that was "Do it till you're sick of it, do it till you can't do it anymore." And I had essentially reached that point, and so in early 1981, I moved back to Vancouver Island, back to Campbell River, and I had a wide cross-section of people that I considered friends or good acquaintances. I'm not aware that I had very many enemies, I wasn't really that kind of an individual that warranted like [inaudible] by anybody. I couldn't ever identify with a particular clique amongst the night crowd in terms of how they grouped off and things. I would go back and forth between three or so different groups, never being sort of a denizens of any one in particular. And so, when I returned to the island, I would go back to the city, because of course what it meant when I came back here is I went into union jobs, within the forest and pulp and paper industry and things like that. So, I was paid very well, and that afforded a lifestyle that it was easy to get into the city on days off, or yeah, if I took a few extra days off. And so, I maintained contact.

And so, it was during that time that also I was seeing in some of the gay men's magazines little articles, or some of them were done like a news clip where they had like a montage from stuff that was out of other publications, and mostly from the East Coast, but some of it out of California as well. It was of the reporting of, like, a mysterious gay flu and also the fact of the Kaposi sarcoma coming up amongst gay men in New York in particular at that – the earliest

reports about the oddity of it. And then also of the reporting from the San Francisco Bay Area and things of that nature and at that—so that—because I wasn't involved in downtown Vancouver life in the same manner, it didn't have it's impact until we started to hear of people who were starting to manifest some of those symptoms as well. And I guess, I can't remember the chronology of labelling, but I think shortly thereafter, then things - you know the label of HIV and that came into play and people were starting to manifest symptoms, and so then the whole tenor of the city started to change. And because I didn't live in it and I would come to visit it, it would be like I would see sort of like a new level of things as it started to take hold of people's minds, and some of their activities. And so that-that was quite an eye opener for me because of course when I did go back to the city, I would still go to the tubs because it was sort of the most easy to way to get off and because I wasn't having—I wasn't having sex in Campbell River. I mean, I was occasional, but it was-that's something that I made a point... is well, no, not really. There was nobody that I really connected with in the sense that I wanted to, because in a smaller town, I would be more likely to not be one night stands, you know, it would be something that would have some moderation of a relationship. And there weren't those people those people weren't there that did that for me. So, I would still go to the tubs when I went to Vancouver, and occasionally Victoria.

And so, it was really—and when they started to talk about how long, or when they were first putting out theories about how long it would take before people started to manifest symptoms and things like that, in the earliest projections that they were doing, it seemed to have some time involved so I realized that I could've just as likely have been having sex with individuals who are carrying at that—before I had even moved away from Vancouver, as a possibility. Because many of my former partners and such were HIV positive and or living with AIDS. So, it had tremendous impact on me. Just absolutely heavy, heavy. I get just like an overcast. Everything, my life became overcast with this very—I don't, I just – like a dark mystery. It's really hard to conceptualize what that feeling was about. It permeated my day, and every day. And especially as we moved through the 1980s, hearing more and more people, you know, that I knew and/or had been bed partners with, who were manifesting symptoms and the... I don't remember what year it was, but I think it was Angles paper in Vancouver that published I believe it was six pages in the centre spread and it was, I think they called it "The Faces of AIDS," and these were basically like passport photo-sized and it was people who had already passed in the Vancouver community. And I knew probably—I knew and or had sex with... probably a third of them. And so that, it sort of was kind of like another sort of crushing feeling that went over. For them, and in particular, to contemplate that, and then also for me because I think at that time I still had not been tested. I don't—I can't recall when the reliable—a reliable testing method actually came into existence but I-which I did do sometime after it became available.

So, it was this pall I carried around with me, and as a consequence, I was self-medicating with alcohol, cigarettes, and marijuana and hashish. And by the late 1980s I realized it was problematic in how much I was self-medicating, and in 1988 I realized an aspect of it, and I stopped marijuana and hashish. And the following year I—well actually, I think in 1988, I was also, one close friend of mine who had moved to Montreal had come out to visit with his partner and they came up to the island and stayed with me and visited and I took them back down island sort of thing, and then I went back east to visit with them and also some of my mother's father's family, who are from Cornwall, Ontario and Ottawa, and I visited with them for the first time in

my life. And then spent time in Montreal. And at that time, my friend [name] shared with me that he - I believe at that time he was only HIV positive. I don't-I believe-yeah, I think it was because I think he had just found out a few weeks before my arrival. So, he was, you know, very... living sort of the full charge of that reality. And of course, in the late eighties that reality was rather bleak. And we had a good time – I was a person that he always was able to talk with and so we did talk. But we also, you know, part of me in my visit was also as - I functioned as a diversion for him at the same time as other times we did talk and share those things. And at the end of my visit, he had made me a promise that when the time came there would be a phone call and it meant that I needed to come, because it was his time to pass and that he wanted me there. And the—it was less than two years later that I was trying to get a hold of him and hadn't been able to do so for some months, and finally a female roommate of his picked up the phone one time, she happened to be home and she picked up his phone and answered and told me that [name] was in hospital and had had numerous days in hospital, and at this point it looked like he would not be coming home at this time. And he had a brain cancer that was inoperable, that the tumor was so deep-seated in the brain matter that it was unreachable for surgery. And so, he was in Jewish general hospital. He was fortunate that - I guess on some levels he was fortunate that he had a grandmother who was Jewish and so he was able to get in there.

And so that summer, I believe it was 1989, I flew back to be with him and I was able to stay in his apartment. And so, as soon as I arrived, I went to his hospital room and I spent the first two hours there basically just sitting and viewing because I could—at that moment, it was very, very hard to see the person that I had previously known, this individual that was in front of me was going through such vast difference that—and it turned out that for my stay there with him, that I never saw that person again, that I had previously known. It was - it was very, very difficult. I kept it together until my last night in Montreal, and then I had an horrendous alcohol blowout that last night and got myself thoroughly drunk, and with his former partner. And they had gone home because he had to work the next day and somehow I made it home to [name]'s apartment. But in my whatever I had—in how low you can go, I had picked up somebody up and they rolled me. And I woke up the next morning and I knew that I had to be out to the airport in the afternoon. And my bags were open and everything, all of my monies in my wallet, everything was gone. So, I found out how low I could go, it was really quite something. And fortunately I-I knew that I had to go and cancel my credit cards and things like that, and so before I did I went—I had—I had a spare debit card and I went to the bank and got a couple hundred dollars and knew that would be enough for taxi fare and whatever to get myself through back to Vancouver Island and such. And then went and cancelled everything and flew home that afternoon.

Then, sorry, I arrived back in Vancouver in the evening, I went out, can't even remember the name of the bar now. I think it might've been *Celebrities* but the—some of [name]'s friends were out, and I was able to talk to them, and that was really – it was very, very traumatic for all of us. And then one of the individuals was also [name]'s cousin, who also was living with HIV, and he just could not handle it. He had to run. I mean literally ran from us, and ran out of the club because just the thought of his cousin being, you know being very close to being no longer of this time period, he could not handle. Because he assumed it was his future as well. The end of that summer, I was still feeling very, very raw from this time the—well, I'll interject. Shortly after I had been back from Montreal, I think it was less than two weeks, in the night, I had this

very strong sense of my friend [name]. And it was—and the feeling about it was that there was also rage, that I felt this presence in the night, and like a day and half later his partner called me to tell me that [name] had passed. And what I found so very odd was, I said, "I'm glad he has ended." And they took affront. And I said, "Well, that his suffering of this lifetime is over now." He wasn't going to get better. And I guess I was just more—I guess I was pragmatic or I guess I just approached life and death from a different perspective and was doing so in that moment that that conversation happened. I don't think I was wrong in holding the view that I held. And I don't think that there's any reason to cling onto this life, to one's own detriment. But needless to say, you know, I wasn't happy that he was dead, I was happy that he was able to get away from his pain. And he was in a lot of pain. But he was catheterized, his urine bag was red and thick with blood. There aren't painkillers that you are not going to be in excruciating pain to have to pass all of that. He was in tremendous pain. And from other things going on in his body.

It was quite a – also, another eye opener being at Jewish general, [name] was up on some floor number I can't remember what it was, it doesn't really matter. But he was in the ward that, he had a private room. It was an isolation room. And the part of that I had been recommended to do was to get [name] outside, you know, he would have to travel by wheelchair. But to get him outside and get him some sun and get him some fresh air, just to get him out of his hospital room, and I guess his room was the talk of that floor of the hospital because when I managed to get him into the wheelchair and moving, the people were keenly aware that there was somebody coming out of his room and they were staring and gawking throughout the whole period of it. It was very strange. Very, very strange experience. They weren't hostile, but I mean, but it was very, very uncomfortable. And I felt terribly sorry that [name] had to notice that. We didn't talk about it. I let him talk about what he wanted to talk about, but one couldn't help but notice that. And I guess that you know certainly wasn't an uncommon experience for the time and later. Yeah.

BK: Well, especially with just the bodily changes that some people experienced. Yeah.

RS: Yeah. Well physically, he had become somewhat of an old man, in his form. He had a different body type. He was not a tall fellow but he was not really petite either, like in the sense you sort of had a, like a short mesomorph form. But he was outrageous. He was—he also on stage self-labelled himself as Faye Got. And he used to do a stage show where he would be, he was – he would pretend that he was the wife of a trucker on the Alaska Highway and he was waiting at his double-wide trailer for his trucker husband to come home. And would sing Pasty Cline songs on stage and also Joni Mitchell songs, with the full octave range of Joni Mitchell. He was really quite something. But he kind of had, I don't know if it would be spina bifida, but it was a little bit of a hunch to his shoulders and by the time of his passing he was very hunched over. He had really, you know, the huge transformation in his appearance and such.

BK: So, he was kind of a member of the drag world, I guess? Drag performer or...? **RS:** Yes, but he didn't—he didn't, uh—he didn't often dress up in women's clothing but he was very effeminate in his manor and his dress anyway, and was very outrageous. And he was from Fort Nelson, and he would go to Fort Nelson that way, and when he came here, that's how he came as well. And so, he would—he had a lot to say. And he had a wonderful mind. He had a very quick mind. And I was always very entertained by his mind and where his thought process went and things of that nature. And I had numerous other friends that were like that and some of them were drag queens. Which was kind of antithesis for me because I wasn't particularly attracted to drag except that I had friends who were drag queens. So, it was kind of a strange anomaly. And I believe, fortunately, at least one of them is still alive.

But at the end of that summer of his dying, I had various—I've just got to close the door, because vehicles - I had kind of my last night of alcohol. For the first time in my life, I had got—so, this is sort of the manifestation of sort of the dark side of things—I had had a night of alcohol that I didn't make to work the next morning. That was the first time that alcohol had ever gotten in the way of me getting to work or things of that nature, and so it was an awakening for me and a pledge, and so I pledged to not have any alcohol, and I said to myself for six months. I knew that I didn't want to do the twelve-step process because I couldn't identify with that process at all. I couldn't rationalize making pledges about a god that I didn't believe in. And so, I made that pledge and at six months along in that, I had an elderly gay couple that I knew in the Comox Valley, and I was going down there for dinner and they made their own homemade wine and, it was good. By definition of how much acetone was in it or not, it was-they made terrible wine. But I was going to try a drink that night. And so, I went and got some, you know really very nice Aussie red that I took along. And had half a glass full over the course of a meal, and it was profoundly negative in my body, and it was, guess it was probably the histamines that I reacted and at that point I basically resolved that I wasn't-I wasn't going to drink. And so, since that time in fall of '89, so that's thirty years come this fall, I have broken my connection with alcohol. Not that I don't take a drink - when I go to Mexico, I have beer on the beach, one or two, because it's cheaper than the water. But I never have more than—but I have fun. I don't have drinks in Canada, I don't keep alcohol. So, it was-over the course of the three years and then the following year I also gave up smoking cigarettes, so all of those things sort of cleared out and sort of gave space for other things to appear.

And I think it was around the time that I was stopping smoking that one Sunday morning I was— I got up and went into the bathroom, was washing my face, and I looked down and there was this mark. Across my-just under my, left pectoral. And in my right and lively mind, I thought holy shit, that's sarcoma. And I gave myself a panic attack. I live alone. I have mostly lived alone in my adult life. I had the odd occasion to have had a roommate, but I had no one in that moment on an early Sunday morning of whom to talk to. It was unbelievable to me what was going on in that, because I had never had anything remotely like that in my life occur. And just having all of those surges of adrenalin coursing through my body was-it was terrifying. I mean, like, no wonder was it about the panic about the mark on my chest, it was the panic that was created by the adrenal stuff flooding through my system. And so, the friends that I would call up on the Campbell River side weren't around, and so I knew that I had—there was a particular friend across the way on Quadra Island, so I resolved to go over there. So, I hopped on the ferry and drove up to her house and found out that she was away, and down at the Cape Mudge Village, which was the Indigenous reserve on Quadra Island. And so, I went down there, and arrived at this other person's home that at that time I hadn't known, and basically fell into her lap. And she talked me through what was going on. And everything sort of started to settle down a bit. The adrenals were still going pretty good. I was surprised that I was able to drive, but I had managed to do that. And then the two of them got up and said, "Well, we've got to go now." And I was going like, what the hell? And they said, oh no, you're coming with us.

And so this person, that my friend was visiting lived in the mans that was associated with the united church that was in Cape Mudge Village, and so they said, "Oh, well there's, you know, a Buddhist teacher here and his talk is going to be beginning soon and we need to go over there." And I said, oh, okay, and so my friend has me by the arm and I'm trying to sit in the back. No, no, no, you know come with and so I go to sit in the middle. No, no, no, come with me, and what does she do, she plants me in the first row of the church. And two minutes later, this small old man in Buddhist robes comes out, brown skin Tibetan, and what's his afternoon talk about, but it was about death. It was like oh. And then I had this thought of like, oh my god. But he proceeded to give this dissertation of the Buddhist view of change and talking, and talking specifically about, you know, end of life and things of that nature. It was amazing because it was kind of like this air conditioner had entered my body and the words and phrases that he used had this cooling out effect that was occurring in me, and I could just feel all of those adrenals settling down. Just dissipating and not having the charge at all. And of course, after all of that was over in the afternoon, I was very fatigued of course because, you know, after sort of the ringer of all of those adrenals, I mostly just wanted to go home and go to bed.

But what it did do was it began a relationship for me of taking teachings from this fellow. And initially it was from when he would come up here three times a year, but then I eventually started to attend his centre in Victoria, and eventually took Buddhist vows. Vows, just of refuse, vows, which is sort of the base of all Buddhist committed practitioners. And so that started to shift things in my life. It turned out of course that the mark was nothing other than just some skin mark. And it was shortly thereafter that I finally got my first HIV test and... And in the old days I – it was like two weeks I think before you got your result and that was an horrendous wait. It was like, I didn't, believe that I was going to have it, but it's amazing what the mind does as one waits for that impending thing because of course it was still a wildcard because everybody was manifesting things differently. Not everybody was the same. And so of course, there was all the possibility and of course for myself, it was the first time, so it was you know, to find out what the baseline was going to be and it was tremendously stressful for those two weeks waiting for that result. But the nasty occurrence was, is that for the first test I had to go to the hospital in Campbell River for that test. And I-there's of course the waiting area for people waiting to be taken back to have their blood draws or whatever tests were being performed at the lab for them. So, the intake individual who took my, from the doctor says in this very loud voice, "Oh! We got an HIV one here!" And I could've crawled, once again, into a snail shell. I mean, now in hindsight of course, like there would be no question that that individual would be canned. But or removed from that position, that's for certain.

But I mean, I didn't even feel like I had any recourse because of course the tenor of the time was so profoundly negative, particularly towards gays, and because you know, we were the harbingers of this horrendous disease and such. And in people's minds that – but I did mention it to the doctor, but of course nothing happened over it. But it was – it didn't set up things very for the two week wait for the result. It was—and of course, because there are very few people that I can talk with during that time, and this is about the time when I lost connection with the few people that I maintained connection with in Vancouver, because they were so busy caring for our friends. And in that caring, I felt so guilty and so bad that I wasn't able to be there to—to do that. Because of many of these people I had very strong positive feelings about and such, but many of

them were so far along that it was also kind of rude for me to pop into town for a weekend, and they weren't up to seeing me and things like that. So, like a lot of that connection was broken. And I know some of those friends became sort of stalwarts of the community of service and some of the organizations around the Vancouver area. And I'm very happy that they were and I'm very happy that they did what they did. And eventually I sort of got over some of that feeling, but it still was not until the later nineties that I got—found a place for some resolve in that, in that regard. In—yeah, I need a sip of tea.

BK: Of course, yes.

RS: How long has this been going on? Oh, almost an hour.

BK: Yeah we've been talking for about an hour so far, which is -I mean, I'm happy to just let you go and then I'll maybe do a little poking around a few things because this has already brought up a few questions for me. But I'm happy to let you kind of keep going if you want, for now.

RS: You could poke.

BK: Yeah, where to start. I think it's interesting, the whole Buddhist thing, we've had quite a few folks now who have mentioned spiritual practice, but especially, particularly Buddhism as something that they ended up doing to deal with this, in some respects. Or like a practice that they adopted during this time, I think is partially a result of the loss and the trauma that they were experiencing at the time. I just think that's interesting, an interesting theme, not something that I would have expected to emerge necessarily from some of these interviews that we've been doing.

RS: And I'm not surprised, of course, because I'm one of them. Amongst Christian churches, there would be not-there would not be many places where one could find a home with, like during this time, because so many of the-so much of what I referred to as church-ianity is about conditions, about having a set of conditions to - before one is accepted into their community. I know that there are exceptions all of these, like all of these statements that I make, I know there are exceptions but the-so many of the church views reinforced societal reactions to the HIV/AIDS crisis and there has—in North America, there has been a strong thread of – I can speak for the man's side only, I don't know in terms of the women's side, there's always been a strong thread of gav-identified men amongst the North American Buddhist practitioners, particularly those ones with the-what are the Mahayana, Vajrayana practice traditions of north India, the Himalayas, China. And then also some for the meditative traditions where, from like the Vipassana traditions of, all Buddhist practice Vipassana, but the ones that strongly represent that are in Southeast Asia, Sri Lanka. But I think it's because in the midst of all that is going on, is to look at things as they are, and after one has received certain teachings and realized some of those teachings, is to be able to dissolve them. To realize that everything—everything is changing. As we know things to be, there is no permanence other than change. It's an introduction in that effect of change an introduction to groundlessness. To lose the sensation of firm ground underneath your feet and to know that that's okay.

Now, many of the Asian tradition teachers come from particular cultural backgrounds, so they don't always say what we necessarily want to hear because some of their teachings are bound by culture, layered on top of classic Buddhist teachers. But if one perseveres one can work through all of that, and I know in my – the teacher that became my heart teacher in Victoria, basically his response to, you know, gay and lesbians and things like that was. oh, it doesn't really matter because at the moment of enlightenment we give up all of it. So, it doesn't matter whether you're gay or straight or whatever the heck it is, at that moment we let all of those things go. I think that the – when I reflect back on the emotional assault, the emotional burden, the emotional great sort of psychic fear of the HIV/AIDS crisis is it was a living example of that groundlessness. So, many of the conventional views that we held were being ripped away from us, and those of us who were either HIV positive or those of us affected by HIV, that the—we couldn't rely on those things we viewed conventional. And so somewhere in that, in the Buddhist philosophy, I think that we could make sense of it, because it also develops a strong sense of logic and cultivation of the rational mind, without discarding emotion. Yeah.

BK: It makes a lot of sense to me, especially given how earth-shattering this was, if you were immersed in the gay community at this time. It was a time for rethinking a lot of different things. Practices and beliefs and all of these things. You mentioned a bit around how mainstream society was responding. Any other thoughts around what the dominant views at the time were towards HIV, or towards gay men at the time?

RS: Well, my thinking is not particularly different than what is sort of conventionally known in the sense of the like the stories of the beginnings of ACT UP and things of that nature, where we saw a society that in and of itself had never accepted people of other sexualities almost find a justification for it, and then goes the religious zealots who had the audacity to say that it was god's vengeance on our lifestyles, and things of that, which still go on to this day. Although nobody ever seems to put them down in public, which I find ironic, because they're so against the teachings of Christ. But it was the lack of care or concern because it wasn't happening in the large numbers in the things that made it to suburbia. I know that that's not technically true, because of course all of us came from somewhere, and you know in Canada, still the larger cities and such are meccas for people who are looking to live in a different fashion than their small communities that they come from. It's not as discomforting these days, but at the same time, it's not comfortable either in the small communities. But there is community in the numbers that are drawn to the larger cities and such. But I guess, yeah, I would just have—I would just reflect—I don't have any particular insights, like I don't have insights in terms of how society was not wanting to deal with this other than what is the conventional norm of the stories of the beginning the gay movement through the demanding of the release of medications and for active research to be done and things of that nature. I don't have anything particular that I can enhance, that knowledge with.

But what did happen, was that there was - without a doubt there was sort of like a re-justification for members of society to be homophobic. And so it became, well, I don't know if it became worse, so I'm kind of like in how Trump is sort of empowered the base to loosen their minds and tongues, the people in society felt that they could say very nasty things about gays in particular in regards to HIV/AIDS and such. I worked in a very straight environment. I worked, the last twenty-seven years, I worked in a pulp and paper mill. And I only knew about two or three other

gay men out of a workforce of twelve hundred. And all – no, there was a woman that I was aware of. But the [laughter]—I mentioned earlier about I lived my life as an open secret, and so almost anybody who wanted to know, knew that I preferred men. So, I did get some hassle, yes, I did get some hassle. I worked in the production side, and when we had shut downs for repair and maintenance, we would have a lot of the tradespeople come into my area, and I would have to direct them to their different jobs and/or to the sort of the protocols of what needed to be done to work in my particular area, so that they were safe to work there. And I would get—I would get hassled by a few individuals – they were always the same ones. But it was interesting that they felt validated in doing so, and also at the same time that others would sit there and allow them to do it. That—that pissed me. That really pissed me, because those other individuals wouldn't be like that if that other person wasn't there. I have that from experience. And so, it was—it was just—it was very strange. And on certain days, I would just clear them out of my control room and tell them to get the fuck out, because I'd had enough.

But my immediate bosses and things like that, they were totally fine. And it was always upper management that seemed to know that when they were being squired through my work area that the gay guy was there. And it was interesting because the CEO of our corporation at that time came into my control room, and I was introduced to him and such, and he – I think he was a gay man himself, because he sort of made, he made intimation of the situation. And so it was, you know, it was sort of – it was kind of bizarre that you know, here I am in this very male-oriented work environment because I think that the only, we'd never even had twenty-five percent female labourers. That the CEO would be doing that, and I also had that, sort of this strange sort of subculture, that there was some sort of handshake that they would do and it was like, oh my god, how strange! I never did figure it out. I asked some people at one time as to, is this the gay handshake and they said, I have no idea. But you know, have you had your hand shook by somebody who puts their index finger down into your palm and scratches it?

BK: That would be a new experience for me as well.

RS: Yeah!

BK: I don't think I would know that one.

RS: Well, I wouldn't either, except it was done a couple of times by different individuals, so I thought maybe it was the secret handshake. I have no idea! But in regards to my life and Buddhist practice, I really took to the Buddhist teachings. I took the Buddhist teachings so much that I started to go to major events, being teachings given by the heads of the lineages of particular schools of Buddhism. And in a Himalayan tradition. And to the of point, like, a month long of teachings on San Juan Island, seven weeks in a remote area of Australia. In the late nineties, yeah, was either the late nineties or around 2000, somewhere in there, I had also been encouraged to take students, my teacher had encouraged me to teach. And so, I initially put a notice out in the community and I had a lot of – the bulk of the people who were interested in coming were people who had gone away for Vipassana retreats, which are silent retreats. So, they would go for seven days, ten days, sometimes two weeks, and that wasn't the type of Buddhism that I was going to be bringing into play, although it would be an aspect of it, it would not be the soul of it. That there were also instruction in terms of the Buddhist philosophy and

view and such, and so most of the people were not interested in doing that, and I have a view that many of them just wanted to turn off, like just stop doing. And that's a valid, that's a valid thing because as we see in our lives, and even more so as they spin out of control, is that people feel this need to do-do-do-do, and they're, you know, waiting for the next attachment so that they can mount that rectangular hand-held device onto their body, and so in wanting to stop doing, it is a valid wish and action to do.

But what I ended up with was about six people who maintained a student-teacher relationship with me for about five years. And I think that we all came to some very interesting things in that process. I was forced to approach my practice from a different manner. of course, and I've-I've always had a little bit of an outrageous aspect of my view of Buddhism. It is not from the Buddhist doctrine, it's not incorrect, it's just not conventional. But part of it is because one of my major teachers is very irreverent and outrageous, is to approach some of something from a more outrageous perspective because we need to break from like a rigid sorts of views or things that are confining, we need to open up and expand ourselves to be able to view the whole panoply of experience and existence. And we don't do that particularly well if we're sedate. And so then in 2004, I went to India and took monk's vows within the [inaudible] tradition of Himalayan Buddhism, and the seat of that for the main monastery is just out of, up the hill from the city of [inaudible] in North Central India. And so, I travelled there and took my vows. There was nobody else taking vows at that time, so I was alone in the room of my twelve good Buddhist monks, sitting around, and so, a whole ceremony took place in Tibetan of which I don't understand Tibetan fluently. I do understand some things in regards to Buddhist teachings in Tibetan, or I know when the translator is screwing up if I don't hear certain words after I've heard the Tibetan and I recognize words and the translator doesn't at least say some of them, then I know he's not a very good translator. So of course, the two habits were teasing me about what I had pledged myself to do for the rest of my life, on that day. But it was all in wonderful good humour. And that's also one thing that I appreciate amongst the, within Buddhist practice is that there is a lot of joy, and a lot of laughter. And so, I have continued to live here though as a Buddhist practitioner in Campbell River, I occasionally go to the city as I will be doing next week to receive teachings and things. But I'm not the sort of individual who would function well to move to Asia and live in a monastery. I'm too old to become of that culture, that's for something that, rare individuals and those others who are brought into that in their youth and live their life in that manner. I'm not a ritual monk, I guess, is what they would say.

BK: Well yeah, thanks for sharing that with me. We're always interested in just hearing a little bit about the tools that people drew from I guess to contribute to their resilience as they were making it through this period. So, I think that's a really important thing for us to capture.

RS: Well, thanks. I respect your appreciation. I don't think I would've made it anywhere near so healthy, or what I—very dangerous word, using that word healthy—but in such a good mind state as I find myself now if I had not had this practice to shore myself up with, and to also dissolve the things that arise in front of me that appear to be obstacles and such. Like it goes back to that, sort of that serendipity prayer right, in the sense of that if I can change what is in front of me. then I should change it, and if I can't change it, I should let it go. So that's the—it's the same as dissolution right, is to not see it as obstacle. And the things I do see as obstacles, see it for what it is, and either change it or to solve it.

BK: So, one thing that I'm a little bit interested about—there's a few tracks that I still kind of want to go down—but one thing that I'm a little bit interested about, was the epidemic manifesting in Campbell River?

RS: Yes. And how I came to know a bit more about how it was manifesting in the North Vancouver Island was there was a mother living on Quadra Island, which is just next, just a ferry ride over from Campbell River, whose son was returning home, living with HIV or maybe it was AIDS – at that time, I'm not sure how, where he was in terms of manifestation. And she became active and connected with some people in the Comox Valley area, just south of Campbell River, who I think also had family members, and they started to politic with the local health care providers and agencies and such in this area, and they worked together and began the North Island AIDS Coalition. And that services from – it was at that time boundaries of the Upper Island Health Unit, which went from Bowser, which is north of Qualicum but south of Courtenay, and all the way over to the mainland, I think as high at that time as to – I'm not sure if it was Bella-Coola or Bella-Bella, I can't remember. But nonetheless a very large area. Now, at that time of course, funding for ASO's was small, the major portions of funds for the province went to AIDS Vancouver, PWA, and to AVI - AIDS Vancouver Island. The name AVI supposed that they were serving Vancouver Island, but mostly they were serving the south island. They did have a roving worker for the north island, but there was not much offered up here. So, like the Parksville-Qualicum area, which had the Mid-Island AIDS Coalition, and then Campbell River and then for all the interior, different ASO organizations that did manifest during that time, we got left a little over ten percent of the funds for the rest of the province to function on. And everything was on, by political whim as to how much you got the following year. But nonetheless, they began real work.

I got involved in that organization a short time after they had founded themselves, and there were a lot of very keen people involved that in various, various manners. And so of course, the first thing was to-to work for the benefit of people living with HIV and AIDS in our areas. And then also was to do community work in terms of education and support, and for people affected by HIV and AIDS. But in the early days in Campbell River, our outreach workers were allowed to go into the high schools and do a lot of instruction in terms of bringing information, identifying, talking about safe sex practices, and things of that nature. All of that has shifted now and the school board has taken control of it, and they have an employee who will filter out what they want people to know, and it's nowhere near as open as what it was in '97, '98 when we were functioning with that. We had some very interesting executive directors during that time and some very wonderful outreach workers. I was really proud to be associated with them and working with them also allayed some of that guilt that I had of not being in the Vancouver area during the time when so many people that I knew were living and dying with HIV and AIDS. And so I was working like a full-time job, so it was sort of a part-time involvement on my side, but I volunteered with them for numerous years and there were—I don't know what our numbers were for the area, there were many people who at a certain stage after their diagnosis would return to their hometowns, and probably a stronger core of Indigenous people who did so, but others as well. I knew some of those people, on both sides, Indigenous and of others.

It was a challenge, because of course for effective treatment, everything went through St. Paul's. So, there were people who came to live in this area, but they didn't necessarily make contact with the organizations here, because the contact was through St. Paul's and through their outreach patient program and such. Because there was one fellow that I had become quite good friends with who would on a regular basis be going to Vancouver. He had retired out here from Calgary and he was going to St. Paul's on a semi-regular basis, and we believe that on his last visit there that things were not-were not good for him. And it is believed by his partner and such that he committed suicide, by driving into a cliff face, up on the upper levels, coming home. It was needless to say very hard for his partner, because he had given up his, well he retired a bit early and they moved out, the first individual had, was about two years sort of living on his own out on Denman Island and then his partner moved out so he had taken a bit of an early retirement. Then you know, a year and a half later, his partner committed suicide. And yeah, there was one young man who made himself well known to our community, was self-identified in the local paper and things of that nature about living with AIDS, and yeah, I think he did some—I think he did some good in the community. And there were others of course who just wanted a quiet life. And of course, just like any ASOs, all contact and such was private. Many chose not to come into our local offices because we also had a needle exchange program and they didn't necessarily want to be around that milieu. They weren't comfortable to come in. So, people would go out to see them.

BK: Yeah, I think that was an issue that was being encountered around the same time at the larger ASOs in Vancouver when the kind of demographic shift occurred, and it wasn't just gay men that were occupying these organizations. Some people didn't want to go to them.

RS: Well, we were there actually I think earlier, because I think AIDS Vancouver, they weren't really doing much of a needle exchange program as they did later, and then because I think that might've been after 2000 that it became more prevalent to be an IV drug population that was in the offices. I think North Island AIDS Coalition started in about 1997, and what ended up happening is that there was a group of individuals here two years prior to that who had set up a needle exchange, and then because of funding and such, they amalgamated with us because we had a paid worker, and who, it also helped us from the North Island AIDS Coalition aspect of it to establish funding for both directions and made us more secure just as, when they started to take on the hep C people as well because it also helped in us securing funding. On all fronts, these are aspects that society doesn't really want much a part of.

BK: Yeah, I think it's great to hear a little bit about that organization because we haven't so far in any of our interviews, and so I didn't really even know about the existence of that organization, to be honest.

RS: No and you probably wouldn't. Just like up in the Okanagan, and say back like in the Nelson area, and things like that, they must've had their own organizations as well.

BK: For sure.

RS: And they would've been fighting for crumbs, just like we were. Now granted, Vancouver had its population and it was the gay capital for western Canada. There were many people that I

met in the late seventies when I moved back then who had moved from Alberta and Saskatchewan and such, and there was a very strong thread of people east of the Rockies that were there in Vancouver that I had not known prior to that. But then that might've been a shift more within our own culture too, where people were, you know were feeling more mobile and wanted, and also get away from family, but also go towards something that they thought was more enviable to be within.

BK: Yeah, but I think, one thing that we have heard a little bit too is that people would sometimes go back to these smaller communities, you know, essentially to die, and so there needed to be support available in those places too.

RS: Yeah. Yeah, because you didn't get it necessarily within your hospital staff and things like that. And also, many people did not want to be hospitalized unless it was absolutely essential, or such, but many preferred to die in a non-hospital environment. And so, if they could do that with family or long-time friends, or of course such, they would much prefer that. And yeah, I don't know there was – because there were always people that I knew that were living with HIV, and some of them still continue to live, which I'm happy of. The medications work for them and I love that they are able to thrive and have non-detectable numbers and things of that nature.

BK: Yeah, it's amazing given what HIV looked like back in the eighties, that people are now living and healthy and not just surviving but thriving. Some of them, at least.

RS: Yeah. Well, there are things that we have to confront. And in whatever capacity that we have, we confront or don't confront and we have to live with that consequence that I don't know as a community that we provide people to find ways to develop healthier self-attitudes and change—and change habit patterns, and habit patterns, ways of thinking, and you know, self-denigration I think has a strong trait amongst the gay population. And, I don't know how it is now but I always found that we were the nastiest to each other. I used to call it sort of like the thousand cuts or we would in our nastiness to each other, waiting to see when somebody would say "ouch." To sort of the mean-spiritedness. I am hoping that that's changing, but I'm not part of an urban crowd anymore to know those things.

BK: Well, I mean that's an interesting question too. In your time over in Vancouver, when you were travelling back and forth a little bit in the eighties, was there a lot of stigma around HIV within the gay community as well?

RS: Oh, absolutely. Absolutely. Because everybody was living with it, almost as if they were manifesting it. Whether they were positive or not positive, it was a pall. It was a whole—when I think of my days of in the late seventies of sauntering into Stanley Park for an afternoon romp, or an early evening romp, there was an attitude and a sort of an ambiance that had a bit of frivolity to it. And then I remember in the eighties, what I saw say going out for a walk with friends on a, you know on a Sunday afternoon or whatever the heck, and being down by, god I even forget the name of the area. But sort of like the English Bay side over from the lagoon, is that Sunset Beach?

BK: Yeah, that sounds right.

RS: Uh, that it, ha. I don't even know how to describe. It's almost like the colour changed in my mind. That, and I would hear friends saying, "Oh, he has it." And oh, you know. And then a little while later, "He has it." And it was, yeah, it was just – and, "Oh, he has it, and you have to be really careful about him." Because there were some pretty crazy people, people trying to infect other people and such. Yeah. Because of course, so many people were resistant to use protection as well, right? In the sense of, "Oh, I'm not going to glove up," and things of that nature. And that took a – well, I guess some people didn't ever, and then I guess others did and things of that nature. Just like some people meditated and others did not. But I guess I would sort of put an overlay of desperation on the you know, the mid- to late-eighties, where things became very sort of desperate. I can't think of another – another word for it.

BK: And that colour change that you spoke about, I imagine that you'd see that in some respects in like, the baths and the bars at the time too?

RS: Oh absolutely, absolutely, yes. Yeah. And some of it was also pallor, because there were also people who were ill, you know, and so they were not robustly healthy anymore and so that was, that changed the sort of the pan of the eye camera as it you know, reviewed the crowd. Their vibrancy was much diminished and that – so yeah, it did have a recourse.

BK: Do you remember, were you hearing about safe sex? You mentioned condoms briefly there. Like when did you start to hear about that and when did you start to maybe see that in practice, in your own experience?

RS: I think it was more towards the later eighties. Already by that time I had stopped being overtly sexual in my activities, probably not really strongly until the early nineties, I think. As I recall, that more, more public push and advertisement, but I don't know, like I'm – I'm sort of skewed on timing because I always remember the awful euphemisms of the American federal government. Their ads that were supposed to be about HIV/AIDS and never used the word so that you never truly knew what they were talking about, except you were supposed to. And that was the Reagan era, so I don't know when the Reagan era ended. Because at that, it was at that time that they were still, that was the inception of ACT UP was of that time period as well, and people were just beginning, and it was a new thought to the idea of using condoms. So, it was it was considerably after that that it started to be promoted. And I can't remember. I remember seeing the outrageous British government ads that were just in your face. And I thought it was bloody wonderful because it had shock value to it, and rightly so, instead of sanitizing it all. Yeah, I'm not sure, I'm sure it probably must've been the nineties, in the early nineties when condoms and such were... Oh, I'm sorry, I'm murky on that. Because I, you know, reflecting on my friend [name], whose doctor told him in Montreal that if he was going to suck somebody off to take them really deep so that it didn't remain in his mouth very long.

BK: Huh. Obviously there were so many scientific unknowns for the first few years of the epidemic that it was very hard to say how one could prevent transmitting HIV. I mean, there wasn't even knowledge of the virus for the first couple years. Some of those unknowns had to be sorted out before condoms could really effectively be promoted, I think.

RS: Yeah, and then met with strong resistance.

BK: Of course. Because gay men have never worn condoms before.

RS: No, but I remember in 1980 that the one fellow that I was in a relationship with who had genital herpes and we went in together at the Vancouver General, the STD in those days clinic and counsel, being counselled about it, and I said to him, I said, "Well, you could put a condom during the time that, you know that you have a manifestation." And it was – he couldn't contemplate the fact of putting on a condom. And I thought, oh well, you know, then there certainly won't be having any sex if you're not going to be putting one on.

BK: That gives a bit of an idea of how bizarre the idea might have appeared to some gay men early on.

RS: Yes. Well, yeah. And that was sort of ironic for what was occurring a few years later. But it was also interesting, sort of reflecting back into those nineteen-eighties years, was who we were seeing, who were sort of the early manifestors of the condition and they were people who were more travel-oriented, people who had more monetary wealth who were, you know, going to [inaudible] on a regular, or the east coast, particularly to New York and such [inaudible] back into the community and [inaudible], and it was one particular clique who in my mind, [inaudible] very judgmental mind, I used to think that they thought they were the beautiful people. And sort of was the irony was that they were one of the groups that was so heavily hit, earliest. And which of course was very tragic, but after the initial times, it just sort of blended into time and space.

BK: Were there other groups that were particularly hard hit? Like, we've heard some people say certain groups...?

RS: I don't know. I'm not sure because I wasn't living there. But like these people, I knew. I wasn't of their group but I, they brushed up against some of the groups of people that I hung round with. And so was there to evidence it. But gee, right now, I can't recall the year. But I think it was in the late-eighties, because the fellow that I used to have sex with occasionally in high school, he had moved and got himself educated at UBC and worked in Vancouver. And he ended up getting HIV, and died of AIDS. And our friend group travelled, he was a vice-principal at [name] school, and so they were having a memorial ceremony for him there. And it was very interesting, his parents were just devastated by it. But one could not mention the word HIV/AIDS at all, about it at that time with them, which was really tragic. It was really tragic because I knew both of them, I had spent many hours with them over the course of years, you know from the sixties, and we were here at the late-eighties, and his father was a foreman in the pulp and paper mill that I worked at, and I was friendly with him. But it was a wonderful late spring day, that the ceremony took place over, and we were a carload of friends who had made it over to Vancouver for the day to go specifically to that. It was a wonderful celebration of his life.

And then it was kind of like, at a certain point, there was this group of, I can't remember the number - six, six or so - and internally I termed them the AIDS Vancouver group, arrived. And they, because I think that they were friends of my friends' life partner. And they were definitely there to support, but it was like you know, they sort of came in and it definitely, they changed the

tenor group of people who attended. Not negatively, particularly, it just changed it. Because my friend's sister, who was considerably older than him, you know, ten, twelve years or so, she was a nurse, and so of course she was totally matter of fact with me and our friends in terms of what had gone on and things of that nature. She had a great amount of love for her brother and such, and spent a lot of time with him in his passing. But, it was just, it was, I don't—it's kind of like a little vignette that one holds in one's mind. Throughout one's life there's certain things that sort of hold up and it can be like little video shots, and here's this you know, idyllic sun dappled day and [name] school out on the lawn with all these chairs set up with this remembrance ceremony for their vice-principal, and then all of this other stuff going on. It was memorable.

BK: Wow.

RS: But I know his mother never got over it. And I would run into his father occasionally and he would always stop and talk, and the funniest thing is, you know, my sexuality never came up with him. And it was non-issue, even though he was not comfortable with his son's sexuality, he was not uncomfortable by me. Which was strange. But I guess because I wasn't his son, maybe. And I had a burly, I had a burly job in the pulp and paper mill.

BK: Yep, doesn't hurt.

RS: Yeah.

BK: Yeah. we haven't had the opportunity to talk to a lot of family members of folks who passed away from HIV, but I think that'd be a really interesting group of people to get to talk to if we get the opportunity.

RS: Absolutely. I think very much so. It's just like those things like in terms of HIV prevention and such, the ones that you can't touch are like within the m[en]-to-m[en] community, those who don't self-identify as gay, how do you reach them? Because those are the critical people, you know. The other people, you're preaching to choir, and it's these other people that have never been able to assuredly get the messages to them. And then these people who, it would be particularly interesting for people where it wasn't an unsettling time to see how that might have evolved over time. Their views and such. Because there's always so much emotional charge around death and dying amongst family groups. And people go to holding very strong views during those times and they don't back down from them for some time afterwards. But I must tell you that the thought just cropped up into me, when I was a little boy, I had the very great grace to have my mother's grandmother, my great-grandmother still alive in my life. She was there until I was almost sixteen years old. And she was, by how her birth certificate identified her, a half-breed. I never knew that when I was a child. She was just my great-grandmother. And she was a very strong individual who had had a husband that she had a child with and he went off to the Barbary Coast one year and never came back, and so she raised a daughter on her own. And she was half-Irish and half Coast Salish from the North Vancouver Squamish band. And I was always enthralled by her. She kept a farm, she raised cows to slaughter weight, or like calves, she raised calves to slaughter weight as young cows. And that's where she would make most of her money. She also had chickens and had eggs and things like that. So, she always, she lived a very simple life. And at one time even was a commercial fisherman. Had a commercial fishing license

and had a partner, they fished the inside of the Salish Sea as we call it now. So very much a pioneering spirit sort of individual. And also this great open heartedness.

And about the time that the Beatles were coming along, I was having hormonal urges and things of that nature and doing great battle with my parents. And I used to spend time with her alone. I was an older child, I had a brother born two years after me who died of birth complications after four days. So, there was then was a gap before my mother had another child, two children nine and eleven years after me. So, I would on my own stay with my great-grandmother for vacation for a few weeks at a time. I loved it because it was very, very rural along the mouth of a creek on central Vancouver Island and she had full trust in me. I didn't need to be policed, other than to stay away from that old man there. You never know what he might get up to. This old man used to do nude sunbathing. And he would, he would take warm, he would get between two logs on the beach and lie in the warm sand and sort of bask in that warmth through the afternoon. But you know, be careful of that old man, [name]. But he never did or tried anything. But I always remember her saying to me, knowing that I was doing battle with my parents, because I wanted to get rid of the brush cut and grow my hair longer. "You have to forgive your parents. They haven't lived long enough." And then she said, "Skirts go up, skirts go down." And it was kind of like change and style and stuff like that, that's what she was alluding to. And that really helped, in the sense of putting some perspective. So, I don't know what else to...

BK: Well, we've covered a lot. Yeah, you're a wonderful storyteller, I must say, so you've made my job very easy. Maybe just a couple larger, like broader, a little obtuse questions. And if you don't want to speak to any of these or you feel like you can't, that's totally fine. How do you think, overall, the epidemic changed the gay community? If it did.

RS: Oh, it changed the community vastly. Vast changes to the community. For one, society was forced to view the community and the community came to know that they were being viewed. That was both positive and negative. With the people becoming ill, so many people stepped forward offering help in whatever manner that they could, many others could not. Other aspects of our diverse population stepped into help. Particularly with, within the women to women group of people, that they stepped in and provided great care. Because of the need for safer sex, it started to change people's attitude about the potential of relationship, where before it occurred for some individuals but not, I don't think, very many, because well, I'd say particularly Vancouver and even through some of the other large urban centres, because there were so many clubs and things of that nature and it was so easy to go out and safe in the sense of an anonymity, as opposed to the years before when there were very few places that people could go. And then today with social media. where people, you know clubs don't survive because social media is satisfying so much of that aspect. And then so many people partnering up in its many manifest forms of monogamous, non-monogamous or - and then the need for real, real change to occur, in the sense of the enshrining of the rights. You know, after having people being denied access to their partners and or friends by family, and by law, in their last days and the estates that some of them co-shared, and to, you know, to my initial thoughts when the right to marry was granted, I was afraid that it was too soon, that it would create a backlash. I think some of that is true but overall, I think it's something that basically people need to suck it up and get over it. That no matter when it was created, it was going to create some backlash. I celebrate and so much enjoy to see people being able to be radiant and open and for people to make families if they so choose.

And for young people too live so much less encumbered by culture mores that never included them, but there is a place for many of them. I think it's particularly wonderful.

BK: Yeah, as a younger gay man, I am extremely, extremely grateful for that myself, and thankful for the contributions of the older folks that paved the way for us. So, thank you.

RS: Oh, you're more than welcome. And that being said, I don't regret the timing of my life whatsoever, that you know, I never got to be a young individual in times that had that level of benefit. Experience teaches us and leads us onto other things, and within the tradition that I practice within, we – one of the basic foundations is called the three visions. And so, in that there is the impure view, and then the pure view on the two extremes and then what resides within is the experiential view. And so, the impure view are those things that bring us negativity and sort of bad action and bad thought. And then in the pure view of course is a view that is bereft of those impurities. But the larger view is the view of experience. And so, you know, to be brave and to invite sort of adversity and also celebration into one's life, I think, now is always a good time to practice it. And so, in the now of my life, I don't regret it.

BK: How has your perspective on HIV changed, looking toward the present.

RS: Oh god, you're going to make me moralistic.

BK: That's okay. Moralize away.

RS: I have always had this segment of my thoughts that never has fully accepted the idea of PrEP, and I guess when I saw, or saw and read about individuals in terms of hearing that there was a way to allay HIV infection through the use of PrEP, I saw all kinds of people taking upand now I'm saying saw, I don't mean my eyes physically saw, I saw by news reportage and anecdotal information and things like that—was so many people running out and having a very, very free sexual lifestyle with multiple partners and doing the party circuit and all. And they still weren't even on PrEP yet, because it still wasn't available as a product. Because nobody took into account the STI's or anything else that could manifest from their behaviour, and now we're getting to such virulent strains of some of the STI's that they are not things that we want to contract. Because I think that we still need to employ a consciousness. And I don't mean that we have to be puritanical and I don't mean that you only have to have one partner, but I think that we need to see clearly what it is that we are doing. And taking responsibility for that. Which could still be, and like if you are rich enough or have a job that has a benefit package that will subsidize and or pay for PrEP, then you are a very fortunate individual. There are many people who don't qualify from that perspective. HIV is a condition that it is for most part possible to live with and to thrive with. Not all of it is true, and probably statistically people die of cancer and all sorts of other things with the same level of frequency of people who are new contractors of HIV dying from AIDS. It's manageable yes, I'll accept that as a statistic. But I think that we still need to look at what we do in order to contract the condition. And we have to take responsibility for those actions. I guess that's my moralistic view, because I just don't think society has to pay for our lifestyle. Not on all fronts, not when we—but of course, and I'm not saying that there should be police set up or things like that, I just mean self-police. Self-police

my mind and my actions. And act from having examined them. And it wouldn't necessarily make me monogamous, I'm not saying that that is the only way, whatsoever.

BK: Well, even in the eighties and early nineties, when safe sex was taken up by a lot of folks in the community, for a lot of people that definitely did not mean monogamy, it just meant condom use and other sorts of precautions.

RS: Yeah.

BK: No, I think I understand what you're saying.

RS: Well yeah, it's just that things exist because of causes and conditions. We create those causes and conditions by our activities and our actions, and so on some levels, we have to own those things. We don't get to shift blame to anybody, or anything of that nature. We have to accept that some things we bring towards ourselves, because of what we do.

BK: Maybe just a final related question: do you have any advice for younger folks out there in the community who didn't live through this? Part of what we're trying to do with this project is to stimulate some intergenerational dialogue around HIV, and as you've already kind of alluded to, I think younger folks and folks like yourself have quite a different perspective on what HIV means, given our different life experiences. So yeah, any advice that you might have for younger folks out there in the community today?

RS: Well, I think that we see it manifest on many different levels. We see it in certainly in the time of HIV and AIDS and then also in regards to hepatitis C, but we also see it in other types of manifestations in terms of things coming out - ignorance. Of individuals' ignorance, by society's ignorance, and by a belief system's ignorance that how we see things manifest, we see it in the rates of murder amongst the transsexual population currently across North America. We see it also in the very strong undercurrent of anti-Islamic views. Most of these things originate from an ignorance, and we can expect that these sorts of things are going to occur in the future, and we see it in this time of, well, Trump and his base of thinkers who have been given voice to act out in really dull, ignorant manners. Not be surprised by the fact that these things will manifest in front of our eyes, be it close to us physically or not, but we will see it because of our global media and such that is being brought to us to. It also has an impact on us that also dulls our senses because we are so overwhelmed with so much input and so much of it is visual and it desensitizes us to a lot of the real stuff that is going and to remember that the camera is being directed at a certain thing to draw your attention in a certain manner, and to look beyond the camera and find out what things are really about. That when things are corrupt and/or being dealt with in an ignorant manner is that it's time to gather together like-minded people and illuminate that darkness of ignorance.

BK: That seems like very apt advice in this particular political moment, as you say. That's kind of it for my formal questions. You covered a lot of what I would've asked, just by virtue of sharing your story with me. Was there anything else that you wanted to bring to this conversation, or expand upon before I turn off the recorder?

RS: I don't think so. I mean, there's other stuff but there's always other stuff. I mean, but it's not - I don't think it's going to be, make much difference to what's already been said.

BK: Sure. Yeah, I think we've covered like a lot of ground. And you've shared a lot of really rich facets of your story with me, so I just really, deeply want to say how appreciative I am and just thank you before I turn this off.

RS: Well, thank you. It was so nice to receive your call after all of those months where I thought that it wasn't going to happen, and to be able to do that, I think is particularly that you were able to reach out to people beyond the Vancouver and Victoria area, because all of our experiences are – all have a different flavour to them, and it's made more whole by reaching other areas of our province.

BK: Oh absolutely, and this has already just given, geographically, a different piece to the story, the stories that we've collected so far. And I hope that we can do more of that as we continue with the project. So, thank you for contributing to that. I'm just going to stop the recorder.

RS: Sure.