

AAHP
AIDS Activist History Project

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Interviewee:	Brenda Richard
Interviewers:	Alexis Shotwell & Gary Kinsman
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Persons present: Brenda Richard – BR
Alexis Shotwell – AS
Gary Kinsman – GK

[START OF TRANSCRIPT]

AS: It's August 6th, 2015 and we're talking with Brenda Richard in Halifax. Thanks so much for talking with us.

BR: Well, you're welcome.

GK: We've started off all of the interviews basically with the same question, which is thinking back on it when do you think you first heard about AIDS and what did you hear?

BR: I first heard about AIDS probably in 1981. I was starting out at U of T (University of Toronto) and my colleague there, one of my classmates was Dennis Haubrich, and he was interested in AIDS. ... Well, at that time it wasn't quite AIDS, but if you know what I mean, we didn't call it HIV so much. So, he was interested in that topic and he and I became very good friends. And when we had a residency to do then in the doctoral program, it was a two-year residency. You had to be in Toronto and complete the course work. So, at the end of that period he went, I believe, to do research in San Francisco on AIDS, but it was in its very early, early stages so there wasn't even the... The name wasn't really used in that way, you know? It had moved from ARC ... So, he told me a bit about the research that he was doing and he told me of the incredibly intense emotional experience of doing the interviews. I remember him saying he recalled that he was doing an interview and the surviving partner was so upset talking about it, because no one had asked him about it, that the recording equipment was shaking so badly you could hardly get the interview. And this had had quite an impact on Dennis. So, I went to San Francisco in the end of '84, or beginning of '85, as part of a conference and to see Dennis and got really more and more interested in the topic.

Then in 1987 I had a student at the school named Bill Ryan, the wonderful Bill Ryan, who was a privilege for me to have as a student. And he was involved with the initial aspects – it wasn't a Coalition, it was a group of men who were HIV-positive at that time. He was helping them gather a group together. And those were the beginnings of the Coalition, and that went along for a year, I believe 1987. And then, in 1988 they secured funding for an office, loosely using that term, on Gottingen Street. And so that's where the Coalition was. And the Coalition was the beginning of most of our education about AIDS. And by that I include the medical profession. Certainly, it was way before social work was involved. Dennis and I were in social work, but that wasn't part of our curriculum. I was there as a feminist activist, I wasn't there as a social worker. That had not prompted my involvement; my involvement had come from the social activism piece. Then, I was asked by a friend who had been asked to do a retreat for the Coalition on mortality, he asked me if I would do it with him. And so I said yes. So, this was 1988. I think it was right after the Coalition

was founded. Although, it wasn't held at the office, it was a retreat. So, I went and there were about eleven men and there was a priest that was doing the piece on sexuality. And so I remember saying to my friend, "It's interesting. We've been asked to do the piece on mortality and he's doing the piece on sexuality." When I got to the retreat – of course, we were all fairly young – and we were all sort of the same age. And so during the course of it, it hit me like a thunderbolt – something I had no idea about, which was they, at a certain point relatively soon, were not going to be living. And so to think that people you knew, with whom you were talking, no one was going to be there soon and they were our age. This was a confluence of part of what people would have characterized as the enormous tragedy of AIDS; besides the marginalization of people, was the combination that people couldn't get over, the impact that people were dying and were young. And so to be talking about death and being young at the same time was difficult. It wasn't that I hadn't experienced grief in my life, I had, but this was distinct. This was with people here and with you. And certainly by the end of, oh, I would say three years at the most; every one of those men was no longer living.

So, that was my introduction, and really in some ways reflects the primary pieces of the Coalition. Then I was asked to be an Advisory Committee member. Now, as I recall it, there was not a separate advisory board. My memory of it, and I could be wrong, because – and I can tell you who could correct me on that, and that's Maureen Shebib, who was also an advisory member. My understanding was, (because I went back and checked all my diaries from '87 to '92) – the years that you were interested in – and I see PWA Board, PWA Board, PWA Board, PWA Board connoting the meetings. So, my memory of it is that we were asked to be advisory members because in order to be a member of the board you had to be HIV-positive and that was to ensure that the direction of the policies that emanated reflected the heart and soul of those people most affected. So, that is where that came from. So to include us, because we were there a lot, we were called advisory members. Now, that's my memory of it whether or not we were on the committee, I don't recall. I do recall going to board meetings a lot and hearing what was going on.

GK: So, the people who were on the advisory board, like Maureen or Mary or Bob Frederickson or Bob Petite, would have just come to general board meetings of the PWA coalition and given general advice, but wouldn't actually participate in making decisions. Is that what would have taken place?

BR: You might participate in the discussion, but you would not have a vote. Only those who were HIV could vote. That's what distinguished your status. And Mary was not an advisory member... Although, she was unofficially an advisory member, she wasn't officially that. Mary was, like Bill Ryan, absolutely... I don't know, the word "essential" pops out, they were so fundamentally precise about what they knew, and what we learned from them and what we all had to learn. Mary was certainly a very early and profound influence. Also, she was involved in women's issues, which the men weren't, so that was interesting... You know, many of the men were anti-choice. And so to be sitting there... There were discussions where we would have to sort some of those things out because they went against our feminist principles. Yeah, so my memory of it is that Maureen and I were advisory members and we're the only two I remember, but there might have been... I don't know if Bob Petite was, but he was there all the time as well.

AS: Can you say a little more about the feminist work that you had been doing that was the background for you and the AIDS work?

BR: Okay. Well, I was sort of one of those long-term feminists from the early '70s, so that was...

AS: Here in Halifax or in other places?

BR: Yes. I was involved in Bryony House. So, that was 1978. And then I was involved in the Women's Action Coalition.

AS: Okay, can you say what that was?

BR: Yes. The Women's Action Coalition came as a response to the provincial Advisory Council on the Status of Women. There was something that had happened that the Council did not take a stand on, and they were seen as rather conservative, but I can't recall that precisely. And it was just felt that it wasn't a feminist organization, so a group of feminist activists decided that we would have a sort of shadow Council and it was called the Women's Action Coalition. And so I was involved in that. I was involved in quite a few things, really – Lesbian and Gay Rights Nova Scotia was one of the things that we were most involved with. And that dovetailed, interestingly, with the Coalition very much so. ... I was going through my diaries and I was seeing all these things, you know, you forget how many.

AS: All the things you did.

BR: Yeah. The Canadian Association of the Schools of Social Work at that time was called CASSW, not CASWE. I was involved in women's things in that and was a founding member of the Queer Caucus... So yeah, those were my activist roots.

AS: I ask because one of the things that we sort of knew that's been good to hear is just how much of what people brought to AIDS work was feminist. And so this myth that the only people working on AIDS were gay men we're finding is just not true at all. That there was actually a lot of people who were... And that AIDS activists were also doing really important pro-choice and abortion solidarity work. So, that's why I asked about that.

BR: Oh, that's interesting. Oh, very much so. The one thing that I think we brought was a respect for their (Coalition's) process. Like, I felt privileged to be there because I remember, honestly, being treated with so much respect ... We were so respectful of each other. I said something about one of them one time, I said, "He was so gentle." I remember a guy looked at me and said, "Gentle? That's ridiculous! He was..." whatever, and I said, "Yeah. He was all that, but in the personal context with me he was always gentle." We had just such a mutual respect for each other.

AS: And then also, times where you had to say, "Actually, no. You can't be against abortion and be..." Right? As you were saying...

BR: Yeah, and we'd have conversations, but they were tinged with respectful challenge... You know, I can remember saying to them, "We just fought the battle with you to ensure that you can have control over the meds that you're assigned as a medical intervention. And now you're telling me that you don't think I would have that right in relation to my own physical/medical intervention?" And they responded "Yeah. Oops, okay. Never thought of it that way." And they changed their perspective. So, there were things that we knew that they didn't, and so many things that they knew that we didn't. But it didn't come out of social work, I just have to say, it was feminist activism on my part.

GK: So, maybe you could just tell us more about what you remember doing in relationship to the PWA Coalition as someone who was trying to give them advice.

BR: Well, I was never giving them advice. I was there only to do whatever they thought that they needed, was there some way that we could help to facilitate that. But, it was never advisory in that sense. It was... might we know someone that we could tap into? Because, so much of it at the time was developing policies within a provincial vacuum. If I could just say this at this point – Peter Wood, Frank Morton, Bruce MacDonald, Dale Oxford, Raymond MacDougall, there was a guy called Fred and Hazen... they were core members.

GK: Was it Fred Wells?

BR: Fred Wells ... Eric Smith was not a board member interestingly enough. He was one of the most, I think, wonderfully independent people in a sense, he was consulted about everything, and he was a central part of everything. Because his story had been so profoundly influential on the provincial and, in some ways, national level. So, he technically wasn't a board member, but only because he didn't want to be. But, he was there. If I could only say one thing in this entire interview, it would be that those men were *never* recognized for what they contributed – saving the lives of other people, which a lot of the AIDS work did, the activism. But, how fundamental their work was, how critical it was, how hard working they were, how intelligent they were, how much foresight they had, how skilled in developing policy, how articulate... I cannot overstate the quality of the work that those men did at that time. They had nothing to work with. Individually, they did not have employment; for a number of different reasons a lot did not have employment. They had lost their employment. So, on a personal level they did not have a lot of finances. But on a larger level they were given so little concrete financial assistance to work with ... And I've worked in a lot of women's organizations, so I knew about that. I knew that we worked three or four nights a week, I knew weekends, but they've never been given the credit that they deserve in a formal way or in an informal way. When I see things like the Order of Canada and, no disrespect meant at all, but oftentimes people in the not-for-profits, in the grassroots organizations, are not recognized. And these men were so impressive. I just can't overstate it. And I worked in academia, so it's not like I was coming out of an environment where I wasn't used to people with knowledge. But no one knew what they knew, no one. The doctors did not know what they knew at the time. They educated the doctors. And teachers didn't know, and politicians didn't know, and the Coalition members gave them their education. And then later the Coalition was replaced. I think, MACAIDS developed ... Anyway, the Coalition morphed into something else. Those ten, eleven, twelve original people never got the credit they deserved. They never got the compensation.

Because, at that time, there was the “good AIDS” way of contracting and the “bad AIDS” way of contracting. And you all know this, and it was alive and well in Halifax, alive and well in Nova Scotia, because homophobia and racism were alive and well. Consequently, if you had contracted HIV through “tainted” blood, then you ultimately were worthy of compensation. But if you had what was only at the end of the day still the same illness, but had contracted it through human contact, then you were not going to be compensated or given benefits. In fact, you were going to be marginalized.

GK: There’s a number of different strands there that maybe we can come back to. It would actually be useful if you wanted to talk a little bit more, if you do want to talk a little more about those tensions between the “good” versus “bad” people living with AIDS, which obviously would have played out here in relationship to Randy and Janet Connors and other people. And not to be critical of them because their work was really important, but if you wanted to say anything more about that sort of tension.

BR: Mary had helped in every way possible with aspects of all persons with AIDS. But, I’d have to say that I had been to a meeting at the hospital where a physician stood up who was involved in this and was giving kind of a lecture, and was talking about the incidents of AIDS that had been reported. This was early on, and he very clearly said... I can still see him with the chart and implement of some kind – and he very clearly went into the deserving and the undeserving. “These are the people who contracted it...” almost, he would have said, “willingly.” These were the terms they used of course, the “innocent victims” and on the correct side you had the hemophilia people, who contracted it innocently. And on the other you had HIV-AIDS originating through sexual contact. And, at that time, the drug paraphernalia means of contracting it through the sharing of needles wasn’t as primary, because it didn’t have the same cache as being able to blame people. Ultimately, the blaming was related to homophobia. – You contracted AIDS because of your own bad behavior. You were responsible for your situation- echoes of the NS response to Donald Marshall as the supposed architect of his own situation.

AS: Do you think also here that quality of, that focus on punishment for the kind of sex you’re having... Do you think that had anything to do with the specific culture of Nova Scotia, or did it have a texture that had to do with the ways that... Sometimes Nova Scotia is thought about, especially in that time, as being slightly more religious ... Did you experience any of that or remember any of that?

BR: I have said that a number of times to people that the Maritimes is particularly homophobic in the sense that... I’ll tell you why, it’s kind of that reflection, I think – and all of this is just opinion – it’s the reflection of, we hold up the idea of ‘family’. If you go anywhere people will say the thing that connects everyone is family. But that was a quantifiable commodity, or that was a selective commodity or that was threatened it seemed. In other words, you were part of family except if you were gay, then you were not a part of the family. This is what distinguishes, I feel, fundamentally homophobia from anything else, in that you could lose your family if you came ‘out’. It is not quite the same as other forms of discrimination. There were countless examples of it during the Coalition of families disowning their children. I mean just countless. In fact people were more afraid of telling people – kind of the Rock Hudson syndrome – more afraid of telling people they

were gay than that they had AIDS but telling someone you had AIDS implied you were gay at that time. And it was so terrifying. I do believe the Maritimes, out of that basically two-party system politically and religiously – Liberal or Conservative, Protestant or Catholic... and certainly the overall racist elements... The ‘family’ thing, and how friendly we are all of that camouflaged that underneath there was a very clear understanding about what was permitted and accepted as family and what wasn’t. I do believe the Maritimes has a particular heritage in that regard. So you risked everything if you came ‘out’ as gay or as having HIV.

AS: That’s interesting. So, you’d been working with the PWA Coalition in an advisory committee role and then at a certain point there’s a women’s outreach project that starts...

BR: Sorry?

AS: Women’s outreach?

BR: Yes. Well, at a certain point there was one woman who came who was HIV-positive and I remember the men were delighted to have her because they didn’t want it to be exclusively male. That wasn’t their goal. So, then she came and I think she fit in. I mean people supported her, but I think perhaps she felt a little alone. And they could be potentially, without meaning to be, intimidating. And I recall, I think she was a bit younger than they were. And then, I believe another woman came, so now there were two women on the board. And at that point, people began to realize, “Wait a second. There’s a whole group of people out there that are impacted that have not been considered. Are afraid to come forward.” Because everyone was afraid to come forward and say... they were HIV positive... So, then the medical information started coming out that, of course, women were experiencing the illness very differently than men, so there had to be a particular emphasis on them. So, some might have wanted to say, “Oh well, we’re all in this together.” Well, we weren’t quite all in it together because by the time the women came forward, as you know, they were much closer to their end stage, unknowingly, because they had been diagnosed so much later. Because, there was this sense of if you’re not a person with hemophilia, or you’re not an active gay man, then you’re fine. So then, the ‘women’ aspect came in. And I think in 1994 there was actually a paper or something written in Nova Scotia. By then probably between ’92 -’94, there was much more work done around women in particular. And of course women were afraid to disclose because there was so much discrimination and prejudice related to HIV.

AS: Can you say more about how the illness was experienced differently by women and men, medically or socially?

BR: Well, the first and most important one is that it never occurred to anyone, any of the physicians, when they were talking to women who were experiencing odd physical things that it could possibly be HIV. So, my recollection of it was they were having uterine... There were issues around...

AS: Yeast infections...

BR: Yeast infections and, if I'm not mistaken, throat infections, but the typology was quite different than with men. It was not as, in some ways, perhaps pronounced. And some of the symptoms could have been passed off as reflective of other things, or a mystery, or whatever. And those are the things that I remember as being the most prominent. The types of things that had never occurred to anyone could be HIV symptoms. So, they were giving them antibiotics and things, but they weren't working. There were kinds of recurring symptoms. Consequently women's medical care was compromised by being uninformed.

AS: And then socially, this sense of not being part of the established groups of gay men or hemophiliacs.

BR: Oh, I see what you're asking.

AS: Well, I'm interested in both the medical side, but also...

BR: Yes. Well, my own feeling is that you really had to hold your own in those groups. I mean, you really had to be very confident of what you knew and happy to learn what you didn't know. And I think some of the women— that wasn't how they got into the group. They didn't get there because they were activists. They got there because they had HIV, and someone had said there was this support group. And so, it was a support group, but... You know how sometimes people need to be with other people who truly experience every part of it. There were things those women were experiencing that the men couldn't. I could be wrong about this, but I don't think people in the women's social networks knew they were HIV+, whereas these men were openly gay... Well, most of them... Frank and Fred and Peter and Dale and Bruce – they were all out, but these women were, if I'm not mistaken 'straight' women whose own families I don't think knew. So, here they were coming to this group for support, but they were at risk. I thought of the men as brothers. This is how they felt to me. They were like, brothers and sisters and we were in it to work together as much as we could... I couldn't experience fully their circumstance. But these young women just, I think, came there for support you know. They just... Someone said, "Well, there's a group." So, I think they needed a group of their own. Ultimately more women were identified, but not that many. The men were there because they were activists. If you were part of the Coalition you weren't there just for support. ... Maybe you were a partner of an activist, but activism was your main thing.

GK: We're going to come back a little bit later and just talk about some of those other people that passed away who were part of the PWA Coalition, if you want to talk more about them. But just more about the PWA Coalition and what it did while you involved. Did you stay involved with the PWA Coalition until the merger with AIDS Nova Scotia?

BR: Yes, until the merger with AIDS Nova Scotia. Yes, I think that I did.

GK: Do you have other memories of what you would have thought might be significant things that the PWA coalition might have done, might have been involved in?

BR: Well, they were involved in petitioning the province on a continual basis to have more policies that were reflective of a humane approach to people with HIV. So, in other words, instead of once you were identified as having HIV you were fired, or once you didn't have access to insurance even though you were not going to live... You needed that life insurance money. You know, the heavy quarantining of people at the hospital, and the conspicuous use of the gowns and the gloves and that for those with AIDS. They weren't using universal precautions. This was the medical system's approach. The Coalition members were working on what we consider very fundamental issues ... making sure that people with HIV in their workplaces could not be dismissed; if you were ill and had a period of illness that you could get sick time, then you could be given a modicum of concrete support... Like, even something as simple as cushions... You know, they couldn't sit on chairs for long periods of time. It was too uncomfortable. Their illness had very particular manifestations that the workplace had to acknowledge and respect. Instead it was the opposite. Workplaces would gossip about someone, or they would make it so uncomfortable that people's employment ended; people felt that they couldn't do their jobs. So, the Coalition's main work was in policy development, to get the province and the medical system to integrate better policies in a straightforward way.

I remember Peter Wood, who basically founded the Coalition, had been in a car accident and he was in a hospital room... He was in a terrible car accident and he could hear the physician out in the hall talking about him – basically, because he knew he was gay – as if he was worthless and had no meaning whatever. And Peter said, "As sick as I was, I said, "That is it!!" And he said, "For anyone who says, 'You can't do something out of anger,'" he said, "The Coalition was founded out of anger. I got angry and I said, 'I am going to do something.'" He meant it was founded out of that level of energy "that's enough". Like, we don't have to put up with that. Just treating people with basic humanity. Some of the policies, I'd have to think about what they were, but we were always trying... There were so many things that needed attention, just basic things. Like, people wouldn't talk to them when they went into a waiting room. They were told to sit over there. The receptionist would not speak to them. I mean, there was only what, one doctor qualified to do HIV-AIDS work in Halifax at one time, and then maybe two? That wasn't enough. Having, or trying for palliative care services, trying for medical doctors to get trained, for the medical school to begin training the interns and students. Coalition members went to Dal to inform the medical school. I'm sure they did a lot of the work there, the men from the Coalition. Yes, mostly to get the government to listen. In the States, what they said about the Reagan era – people were "dying of red tape", so were people here.

GK: Do you have any memories of the period of 1992 to 1993? The province is developing what it's referring to as the provincial AIDS strategy. Do you have memory of the organizing that went on there? I was in the Valley AIDS Concern Group at that time because I was teaching at Acadia, so I was involved a little bit in that process. Do you have memories of that organizing? And, of course, the AIDS strategy was entirely, totally inadequate that they came up with.

BR: My memory of that is only that we thought... Just being honest, that the Coalition was so much more sophisticated in their thinking than what the AIDS strategy was going to be able to, or was interested in, wanting to do. And the Coalition was... they'd been at this a while and they had a

very high level of understanding. So, I always had a feeling that perhaps it was having to fit into what the province was going to allow. “Make sure you don’t go too far in this, make sure you whatever, because otherwise you’d alienate them”. You know, you had to work within those boundaries. I remember there was a provincial group. Mary and I submitted a proposal to look at the family situations of the men, in terms of support – family in that broad sense and what kinds of support. And we didn’t get grant money for that because they said they wanted something more community-based. So, the next year we put in something that was community-based and they said they wanted something more family-based. [laughter] You know, it was that kind of thing. That’s my memory of having to fit things into what they thought.

GK: Into the government’s agenda.

BR: Yes, because they weren’t intending to do anything spectacular. Another example the Premier at the time - despite him LGRNS had lobbied to get the sexual orientation amendment into the Nova Scotia Human Rights Act –was known as the person who at the end of the day was not budging on it. No matter what LGRNS did, it didn’t work. It was two or three years of lobbying, but, as soon as he left, and with a new Premier Cameron, the Act went forward and was amended right away. It was our lobbying that did that. But with the AIDS strategy, I think, people had to kind of fit in. And instead of hiring these men from the Coalition, they were the experts really who ended up having to present material to people who were just learning. These were the guys who should have been heading up the provincial strategy. The word cooptation comes to mind, but I don’t know... I can’t remember any of the people involved in the AIDS strategy itself. It’s like, you hand a portfolio to someone and say, “Okay, now you look after that.” I don’t know if that’s how it works.

AS: And they have no clue. They don’t know anything about it.

BR: Yes. And these men knew everything because they were so sophisticated in their knowledge of AIDS.

GK: Unless there was something more directly you want to say about the PWA Coalition right now, we’ll come back to remembering some of the people who died. Any connections or memories about the ACT UP group that existed?

BR: I wasn’t really involved in the ACT UP group. That was Mary. And I know that you’ve asked about that picture and I was telling Mary I think I have it, but I couldn’t find it. I’ve looked... Well, all I would have had was a picture in the paper. It was this big picture in the paper and it was Mary in a jean jacket hauling this donkey up the street, which was symbolizing the stubbornness of the provincial government, I think. I’ve been thinking about where it would have been and I think it might have been in the *Daily News*, which is now defunct. But, if it was in the *Chronicle Herald*, Gary, you might be able to get hold of it if you said who you were. It would have been... Did she say it would have been around ’92?

GK: Well, it would have been December 1st, 1990, I think. If the picture is of the same event that we’ve heard other people talk about, it’s December 1st, 1990. Yes, so we’d be looking for December 2nd probably.

BR: But you know, Gary, that's interesting because my memory is that it's a little bit later than that. Also, a jean jacket in December 1st in Halifax? Anyway, I could be wrong...

GK: Maybe there were two donkey demonstrations.

AS: But also, if it was connected to the provincial strategy – “Going too slow.”

GK: We do want to recover that picture. Robin told us he might have it somewhere too. We'll try to track it down. We want a picture of Mary, but we also want the donkey. And Robin called the donkey Pedro, but I don't know if that's true.

BR: I think that's right.

AS: A number of people have also said that the initial desire was for it to be a pig because there was an acting premier named Bacon.

AS: Oh yes?

GK: But they couldn't find a pig, so that's where the donkey came in.

AS: Someone had a donkey.

BR: He was Acting Premier, so I wonder... So, that's interesting. Yes, so my memory of it being '92 may have been wrong. But, the other thing would be the *Chronicle Herald... Daily News* is defunct... But also what about *Wayves*? They might have printed it as well.

GK: Yes, we've got to check that out. We haven't been able to do as much archival searching work as we would like to do in Nova Scotia, but we'll do more of that.

AS: Did you want to say anything more about the Women's Outreach Project? You talked about why it was needed, but just about how it worked or if more women came in, or what the activities were?

BR: I'm really sorry, because I'd have to look that up a bit more. I remember going to workshops and there was someone in charge of it, so I think I was on the hiring committee for that position actually. Once someone was on that in charge of it, they were moving on it and doing good work. It spread the news throughout the city and province. Because at that time – Gary, you might agree – the city and province, you could almost say Halifax/NS because so many people came to Halifax when they became ill with respect to HIV because it was the only place where you could have a medical focus on HIV.

GK: And one of the concerns raised by all of the community-based groups that emerged outside Halifax was that everything was in Halifax and nothing was happening anywhere else. I think, eventually when we got anonymous testing it was only here and it was not

anywhere else. That was one of the major issues. It was also raised around the provincial AIDS strategy that there was nothing for anyone outside Halifax.

BR: Yes. Even say, anonymous testing that was a whole battle there. Like, things that we take for granted. Oh my gosh, you “couldn’t do that one” and “why you couldn’t do it”. And always falling back on the so-called ethical aspect, but it was unethical to treat people the way they were being treated.

GK: And we are going to talk to people... We’re going to talk to Jane.

BR: I was going to say Jane Allen was the person who was running it, so she would be the best person to say.

GK: Maybe as a somewhat related question, do you have memories of the Black Outreach Project that the PWA coalition would have organized? I realize you wouldn’t have been involved in that.

BR: I have two memories related to that. One of them is, I think at that time there was only one African-Nova Scotian man at the Coalition and that was near the end. I remember people relating that he had been told if he wanted to continue to be a part of his church, he would have to go in front of the congregation and apologize for his activity, which is a common thing that people have to do. I know other young women who were “pregnant before marriage” – what a loaded term that is – and they would have to go in front of their churches and apologize and ask for forgiveness. But, I remember he was completely ostracized, he felt, in his community and even in his church, so that is one very strong memory. And therefore, there was much more pressure on him, pressure on African-Nova Scotian people that had HIV not to come forward – pressure they felt, as persons but also they felt from the community they said.

GK: Right, for sure. So, when the process of the merger between the PWA Coalition and AIDS – Nova Scotia is happening, you’re still involved with the PWA coalition during that period of time – ’93 to ’95, the merger takes place. And in ’95 this produces the AIDS Coalition of Nova Scotia. Do you have any memories of any of the tensions or difficulties that might have been produced around that merger?

BR: Well, I was going to say, my memory is one of tension, but maybe my memory is faulty. What I remember is they were going to put all this – I’ll be very candid, and I could be wrong because it’s almost 30 years – but my memory is that if they were going to put all this money into a new organization, why not just pay the men who worked at the Coalition to continue to do the incredible work they were doing. So, I felt it was unfair. I didn’t feel that it was appropriate ... Just a thought that it was going to be perhaps more conservative. Or it was going to have to answer to governmental or provincial bureaucrats essentially. And so it was, in a way, pushing the Coalition out. And the Coalition, from my vantage point, was just a tremendously wonderful organization. Why would you do that? They were the founders. I mean there were parallels with feminist things as well. Like, we did a lot of things that today people accept as *de rigueur*, ordinary or whatever, but they have their roots in feminism. When we were critiqued and criticized and humiliated for

even suggesting certain changes. Why would they do that? Why would they create a new organization when they had this? ... But you know why, it's because those men were gay activists. Underneath it all it wasn't only about the HIV/AIDS stigma, it was because these men were activists. They were not afraid to speak up. They were articulate and they could frame their arguments very well, and I think it was too much of a threat.

GK: Did you stay involved after the merger?

BR: I don't recall that I did, Gary.

GK: I think there were a lot of people who didn't.

BR: I don't recall that I did. I don't have a lot of memories of it.

GK: That's fine.

BR: But I remember that time.

GK: So one of the things, because you knew a number of people who founded the PWA Coalition and you've mentioned their names, if you wanted to tell us anything more about them, because part of what we're trying to do is... You know, we can't talk to them right now. We can't include their stories in the same way and we're going to have a whole section on remembering people who have died and passed away from the different cities that we're doing work in relation to. So, if there's anything you want to say. And I could mention some names if that's helpful. You've already mentioned Peter Wood, but if there's anything more that you wanted to say about Peter.

BR: Peter was fearless. He would put himself on the line publically with sincerity, with energy, with a clearly articulated position on matters that were considered extraordinarily radical. And he would just say it very directly. And he was able to do that in a way that it was really hard not to see his argument. That made him very, very dangerous for anyone who was insisting on remaining uninformed in terms of being a spokesperson for the Coalition. Some people felt there were times, you know I'm sure, where they were like, "Oh, Peter. Peter..." But, that was Peter and that's, in part, why the Coalition had the standards that it did. It had very high standards, very high standards for the members themselves – number one. They worked so hard. And number two, they had standards for everyone else who interacted with them and felt that they should have equally high standards, so I believe that Peter had a lot to do with that. He was a wonderful leader. People looked up to Peter.

GK: I got to know Peter a little bit here, but also he was in St John's when I was there for a while.

BR: I mean some people might say, "Oh yes, Peter was a character." But, no one would ever, ever be able to discount his intelligence, his willingness to do what was difficult, not what was easy. He

took on the difficult roles and said, “This is what we’re going to do. Let’s do it.” And, at that time, it was really important to have someone like that.

GK: So, other people... Like, there’s Dale and Bruce.

BR: Dale, yes... I knew those guys. Dale, I remember him because he was from Newfoundland, from a large family, I think ten. I remember him. He had curly hair; he was young. He was a sweet guy and I remember him coming in and telling a story, that he was so petrified – *petrified* – of his family knowing that he was gay. And therefore, he couldn’t tell them he was ill. He was just petrified that they would cast him out whatever. And then gradually his mom came to know. I guess maybe he told his mom, but his dad, he was just so afraid of his father knowing. I remember him telling us this and he went home, I think, to Newfoundland for a gathering of some kind. And so he took his father aside and, you know, it was hard... At the service and told him and his dad just looked at him and said, “That’s okay, son. We still love you,” or something ... You know, it was kind of the Elton John song about that. It just reminds me of the importance of “a father to his son.” But Dale, afterwards would say, “You know, this was the thing I feared the most. I had worked myself up. I had spent years figuring all this out,” and in the end his dad just said, “That’s okay, son.” And then Dale was able to laugh about that. But, other people didn’t have those experiences. They had the opposite. I remember one of them, a PWA Coalition fellow, saying – I know who it is, but I don’t want to name him right now – that his Minister... And they were church going people. He had gone home to his home in this rural area to die because he was that sick, and his Minister came to the house, because they went to church together every Sunday and asked him not come – “Please don’t come to church anymore.” Those were things that, you know, people experienced. So, Dale seemed younger, but maybe he wasn’t, and he was of good will. He was willing to do what had to be done and he was eager and he had a wonderful temperament. He was there all the time. There were some of them that were at the office all the time, night and day – morning, noon, and night. And he was one of them.

And then Bruce, his partner, was a little bit older, but not much. Bruce had two children to whom he was devoted, as was Dale. If I’m not mistaken, Bruce and his former partner, his former wife... I think they were still managing to have a relationship, especially around the children. So Bruce and Dale were there all the time. And Bruce was very sweet; he was always smiling and he always contributed. He was a bit quieter than Dale, but they were together and they were always there. They were just a central part of it as well. They worked really hard, and played hard too.

GK: I only knew them briefly when I was first teaching at Acadia. Raymond MacDougall, do you remember?

BR: Yeah. I loved Raymond. When I think about Raymond I would think about goodness, because he *was* goodness. You know, it was Raymond that I had said he’s very gentle, and you know, people said “That can’t be Raymond!” I remember I offered to try to get some entertainment event things, maybe they could donate to the Coalition. So that the men could have some entertainment because they didn’t have money to go buy tickets and whatever. And so I remember the note I got from Raymond – “Thank you for helping us boys.” I mean he was so committed – so committed – to the Coalition. He was always there. And he wasn’t very old, and he was always there. I’d say I

would have known Raymond 3 years, and then he became more and more ill. And I was there at the hospital, I think there were four or five of us from the Coalition who were there, when he died. That was also another thing that was built in, was that no one would die alone. Because that was also something that was infinitely possible because of people's circumstances.

So, Fred Wells... I didn't know him as much as I knew Bruce and Raymond, or Peter. Frank was there. Frank was a force in the development of the Coalition. You probably knew Frank.

GK: Just a little bit.

BR: He and Peter, I guess, were the founders of the coalition. At a meeting he would have very, very strong opinions about things. And then sometimes he'd want something done a certain way and Peter would say, "I'll talk to Frank." They had a lot of respect for each other. I always found Frank very... very good to get along with. I never had any problems with Frank at all, but he certainly, deservedly so, had very strong thoughts about how things should be run, what should happen.

Eric, I just think the world of Eric. I mean Eric clings to his principles. You know, if you're not a feminist, and you think you want to help women and certain services, but if you don't have the principles, the tree, you've got nothing to hang them on to. So you're just going to go from issue to issue. Well, I feel that Eric has the principles and he's not afraid to, some would say, be critical. And some might take issue with that. I don't. I feel he's earned the right; he's lived through a lot of loss, a lot of his own experience. But also, I always find Eric... I've had him come to classes and whatever, and I always find Eric so knowledgeable and he's got the view of things that I appreciate. I've got so much respect for him.

GK: We did a two-part interview with him. You might want to check it out at some point. I think it covers a lot of important things. I don't know if you would have known Wilson Hodder, who would have been a bit later.

BR: Yes. Wilson, he was with the strategy, he was with the other... Wasn't he?

GK: No, he actually became... I don't know what you'd call it, but the major spokesperson for the PWA coalition. It's slightly later on.

BR: Yes, I remember Wilson. ... I don't have strong memories of Wilson.

GK: Memories of anybody else?

BR: Do you have any other names? Like, I remember there were about eleven of the central people ... And I'm just thinking... Also, Raymond's partner was there, but he passed.

GK: There was someone named Hazen.

BR: Hazen was Raymond's partner, I think. And he died. Yeah, Hazen was quieter, though.

GK: In terms of people who passed away, at least in that earlier period, I've mentioned the names I know of.

BR: Me too, so I think we must...

GK: I know there were other people around, but I should tell you that Eric Smith showed me a picture of what he described as the founding group of the PWA Coalition. He was in the picture, but everyone else was dead. There may have one or two other people beyond the names we've mentioned, but no one else I can remember.

BR: Okay. And, you know, when I'm saying eleven people at that first... Remember what I said about the retreat? Eric wasn't there. Besides myself and my friend who were there, there could have been just nine people. That fits more with the people I remember as being – Peter, Frank, Dale, Bruce, Raymond, Raymond's partner... So, that's just... And if you're saying Wilson.

GK: Wilson's later.

BR: He wasn't at that group.

GK: He was not around then.

BR: But every one of those people within that group had died within two and a half years probably of that time. Eric is the only living member, and has been the only living member probably since about '92, '93.

GK: And part of why he wasn't on the board, at least as he expressed to us, was that he was still associated with the AIDS Task Force and felt that that was a conflict. I think he actually gets more involved directly when Peter goes to St. John's for a couple of years.

BR: Yes, and he was always involved. People knew Eric had opinions and he had experience, and his opinions were very much respected. Eric was there all the time, he just didn't go to the board meetings.

GK: Well, when I went to the PWA coalition office one of my experiences, both early on and then when I was back here at Acadia in '92-'93, is there were always tons of people around. You got a sense that while there was a lot of work going on, it was also, a social center, a hangout center, a support center. At least for the gay men with AIDS and HIV who were there. It could have been experienced differently by women and people of colour.

BR: Yes, but I will tell you that myself, and I think Mary would say this, I think Maureen would say this... I felt so comfortable there, Gary. I had been involved in a lot of women's organizations and so was familiar with working in the community. I felt so respected and it was so peaceful there at the Coalition in its own way.

GK: And we are going to try and talk to Maureen.

BR: She is central because she was providing legal advice and she was the first advisory member of the group. She was central to helping them shape how they were going to approach certain things, and she was very close to them. As was Mary, but from a difficult angle. Maureen's observations would be very important.

GK: We're coming towards the end, so this is an opportunity for you to talk about anything you haven't had an opportunity to talk about so far.

BR: I'm sorry I wasn't more specific about the policies...

GK: This has all been wonderful. Remember, we're talking to a lot of people who will give different parts of the picture.

BR: Super, yes.

GK: It sounds like this was a very important period in your life. Maybe if you just want to reflect on that a bit more it may be useful. Like, it was a major learning experience.

BR: It was, as some would say, a seminal experience. Well with women's issues, of course, I had been involved in a lot of grassroots women's things, but I was a woman and so they were all... We were all in it together and we understood the issues. This was distinct, but I understood marginalization and I understood homophobia. I experienced it, knew it, understood it. So, there were things I shared with these men that I didn't share with a lot of the feminist activists who weren't gay. It was like, okay, but they haven't had to survive. It was just a camaraderie. I just can't explain it, it was camaraderie. And it was so very important because so much rested on it. I mean when I had been awakened at that retreat with the sudden realization... people were talking about their funerals. And I remember talking to a minister later, who was very involved in the coalition saying, "Can you believe that they all want to talk about their funerals?" And I was like, "I do understand." I came to understand. So yeah, I had a lot in common with them. I remember them saying that they would go out to a club, it was a gay club, and they felt ostracized there. That they would sit at a table and no one would come sit with them. I remember that really hurt. I felt – ah, man. And, I think, some of them felt – I can't speak for them, but they would certainly articulate that they didn't always feel a lot of support from the gay men's community. I'm wondering if part of why we were drawn in, in some ways, is because people were needed. There was a need there for someone with an activist understanding to come in. And, for me, it felt like a privilege. And then I was able to do classes on it and have people start to get more exposed to it and we got the local NSASW [Nova Scotia Association of Social Workers] to do their conference on that. I remember apparently some people complained like 'why would you want to do it on HIV/AIDS?' Yeah, it was quite a time. You either had to be there and get involved, or I don't know how one could have lived with oneself knowing what they were going through; they had nothing. At least I had a job and could offer something – support of any kind. Yeah, it was wonderful. I would say it was probably right up there with other meaningful activism, as far as experiences, where I would walk away and say, "Oh my gosh, it doesn't get any better than that." That was my experience with the PWA Coalition. It doesn't get any better than that, you know? Because it was right on my

ideological trajectory and it was so critical – it was life and death. So, it was the best and the hardest.

GK: I want to come back to two things. One that you told us about before the interview actually started, which is about Peter and a comment around funerals – if you wanted to talk about that again.

BR: Well, we went to one more funeral and there were two ministers usually, both were gay, and they were the conductors of the funerals. It was after one of them that I must have said at the funeral – because you're invited to speak, it must have been Raymond's funeral – I just mentioned a couple of things and that he was gentle. And I think the minister afterwards said, "You know, Brenda said he was gentle, but I can say he was spirited and hard and difficult to get along with." You know, that kind of thing. So, it was like, okay; Every time we went there were the two sides of the person presented. Someone might say, "Yes, they're this... Now, we know they had this... They were this, but you know they were..." That kind of thing. It was like, this need to give the positive and a negative balance. But it wasn't a reference letter they were doing. And I don't know if it was because the people who died were young and they felt they needed to do whatever ... Maybe some arguments are still there. But, coming back after the service, I remember, we were at the Coalition and we were just sitting there like this. I can still see Peter with his head in his hands and he was tall and thin. And I was just sitting there like that. We were leaning on this, I sort of remember it as a table and he said, "You know what? I don't want anything negative said about me when I die. Nothing! No one's to say, he was this, he was that, he was whatever... Only positive things." He said, "I'm tired of hearing, oh but they were this, and they were that... Surely at your funeral you've earned the right for people to just talk about you in a positive way." I never forgot it and I never, ever went to a funeral or heard anything without thinking of him, and thinking they don't need to hear that the person was... They just need to hear the good, because Peter was critiqued in life a fair bit. He must have suffered through a lot of critique and he seemed to be really thick-skinned, but none of us are that thick-skinned. And he took it on behalf of himself and everyone else.

GK: Thanks for sharing that with us. When we talked earlier and Randy and Janet's names came up, I wasn't sure if you wanted to say more about them or about the issues they raised. I just thought you might to. If you don't want to that's also fine.

BR: No, only that I wished the men could have had the same opportunity for financial support, because they needed it. And they had been our educators. They had done the tough slogging. They were the ones that at the beginning let everyone know what was going on and, more importantly, what the crucial issues were came from those men. And then it had nothing to with anyone in particular, but the issue of HIV/AIDS got kind of diverted away from the men who had worked so hard, and who had done so much, and who had made it possible, facilitated all the benefits other people would reap. But, no one ever thought to say, "You know what? You deserve to be compensated also, because we were so tardy at getting to the roots of how this illness was spread, and what was going on, that we owe you this. You deserve this." That was always a huge regret for me. And so I'm happy that you're doing this because those men need the recognition that they never received. Or, even the concrete remuneration to be able to live a dignified life when you have incredible challenges physically. So, that was my only concern.

GK: Basically, we're at the end unless there are questions that you want to ask. You've given us a number of other people to talk to. We will try to talk to Maureen. Any other names of people you think we should speak to?

BR: Well, you're going to talk to Bill Ryan.

GK: Well, obviously now. [laughter] [...]

BR: Oh look, if there are one or two or three people in your life that you think, man, if someone ever said that anything he did lacked integrity you'd be able to say, "Absolutely not," without even having talked to them – that's Bill. He's just a wonderful human being. He and his writing partner Shari Brotman. So committed to critical issues.

GK: I forgot that he started off doing organizing here.

BR: He had a real role here. And then once he graduated... He was in a Master's program and, I think, I was his project supervisor and that's how I got to know Bill, and I got to know the work he was doing. But he wasn't at the Coalition then. He was central in the founding of the Nova Scotia Coalition, so his name could be kind of left out of that, but really that's my recollection.

GK: We'll try and talk with him.

AS: Good. Anyone else?

BR: Those men that we talked about, those are the ones that I saw all the time at the Coalition. Those were the central people.

GK: Thanks.

[END OF TRANSCRIPT]