SARAH SCHULMAN: If you could say your name, how old you are, today’s date, and where we are?

KENDALL THOMAS: My name is Kendall Thomas. I am 46. Today’s date is the 3rd of May, 2003, and we are in New York City.

SS: In fabulous Chelsea, in your apartment. Kendall, do you remember the first time you heard the word AIDS?

KT: I do. Well, I remember the first conversation that I had about AIDS. It was with my mother and it was in July of 1983 and I was about to move to New York from Sacramento, where I’d been living, after I graduated from law school. And I distinctly remember standing in the driveway of her house and having to listen to this little speech about taking care of myself and being careful about AIDS. Before that, obviously, I had followed, mostly in the Bay Area Reporter – since I was living out in northern California – the accounts of this strange, gay cancer. But, that was before the epidemic had a name. I do remember reading, also in the northern California gay press about GRID, which was also pre-named before AIDS. But, I’d identified the moment as I remember talking about AIDS in the summer of 1983, which would be almost 20 years ago.

SS: Do you think that knowing that your mother wanted you to live has helped you stay alive?

KT: Yeah. This was not my experience in my own family, but I can certainly understand and feel for those people whose families did not affirm their
sexualities. And, I can understand, as well, how that sense that the people closest
to them, on some level, felt that the lives of gay men, in particular, and queers,
more generally, were not lives worth living and how sexual choices – choices
about risk – may well have been determined by that sense that, these people who
are close to me don’t really care, so why should I care? But I think it’s also
important to remember that we didn’t know for the longest how or why people
were getting sick. It took some time before the link was made – even before it
had been established clinically – that certain, unprotected sexual practices were
leading to infection with HIV, because we hadn’t even isolated HIV.

SS: Who was the first person in your life who had AIDS?

KT: The person who was closest to me was someone I met very shortly after I
came to New York City – a white guy named Tom. And, it was in the context of my
relationship with him that I experienced for the first time, up close and personal, the
course of the life of someone who’d been infected. It was just an awful time, because
you had this sense of the palpable anxiety that comes from living life in a heightened
state of emergency, or in a state of emergency – anxiety that you have a really tortured
relationship to because on the one hand, it was clear that the epidemic was ravaging this
still relatively new and, certainly still fragile, urban, gay community. And, I think people
– I certainly found myself suspended between – on any given day — acknowledging it,
and just this kind of fantastic, wishful thinking – a kind of magical thinking that would
make it go away. The baths were still open, I think, when I came to New York. And I
had this experience, from the time I was in college, of coming down from Connecticut to
New York. I’d actually lived in New York, for about eight months in 1979, which was an extraordinary time to be gay and 22, in New York City. And, by the time I came back to New York, it was another thing. So, the kinds of relationships that I knew in 1979 had already – in some profound sense – ceased to be possible by 1983 and the time I met Tom, who knew he was sick.

SS: Do you remember any specific moment of interaction with him, when AIDS became a reality for you?

KT: Again, it’s these quotidian things that would take on, and took on – I don’t know whether it’s take on or took on. All of this, of course, is being filtered through the extraordinary unreliable lens of memory. There are just these moments I remember. I remember he lived around the corner from The Works – the Upper West Side bar on Columbus – in the block between Amsterdam and Columbus, on 83rd. And I do remember a walk, one night, it must have been in the summer, when there was this unspoken but palpable mutual recognition between us that his life was at risk and that he was probably going to die. And so, that was a moment where death entered my relationship with a gay man in a way that made it clear to me that it was no longer possible to be gay in the way that I had been gay in 1979, when I had lived in New York. That being gay now meant something very different.

SS: Can you articulate what that was?

KT: No, no, it wasn’t clear at all – we were improvising. I do know one thing – I never had, not for a single moment, even in the midst of this clear understanding that there was real danger that attended or could attend certain ways of having sex with other
men. I didn’t make what I think is the false and fallacious connection that a lot of people made – all too many people tragically made – between gay male desire and moralism, right? It was a really easy slippage. Well, if we’re getting sick, and we’re getting sick because of the kind of sex we’re having, then the kind of sex we’re having is bad, and if the kind of sex we’re having is bad then gay sexual culture, as such, is bad. And, if gay sexual culture is bad, then gay men, who, obviously were responsible for sustaining this public sexual culture in a way that was very different than it was for women – gay men must be bad. That was precisely – we now realize from a prevention strategy – the most disastrous line of thinking that we could possibly have followed, largely because of the force and strength of internalized homophobia. There were all too many people – even people, who would later come to be involved in AIDS activism, and who would do good work – there were all too many people who became part of that moment, who endorsed some of these really, politically retrograde notions because they couldn’t resist the temptation of the totalizing move toward moralism.

SS: And how come you were able to resist that?

KT: It’s strange, actually. I was raised in a very fundamentalist, Christian family, but there was a component – we didn’t have the term for it – of that pietistic Christianity in the African-American context that understood Christian theology as a theology of liberation. And so, when I was a kid, I can remember having a black armband pinned to my coat, and marching with all these other black folks, from the predominantly black part of town, down to the courthouse, or being on picket lines at grocery stores in the neighborhood, where black people couldn’t get jobs. And, I
remember clearly that the meaning and purpose of these actions was explained in terms of God’s will that people who were oppressed not be oppressed. And, it was just very easy for me to see – for me personally to see – from the very beginning, race and sexuality in those structurally similar terms.

Although I’d be lying if I told you I’d not done battle with internalized homophobia and gay shame, it was clear to me, in my gut, that AIDS had nothing to do with gay sexual culture, as opposed to sexual practices. And, although this fact was not initially publicized to the extent that one would have expected, it was very quickly clear, relatively soon into the early life of the epidemic, that this was not an epidemic that was restricted to gay men in the cities. It had that racial component. So, very soon after it was homosexualized, it was racialized. But, you know, who can account for it? On some level, I think I just refused that kind of thinking. It didn’t hurt that I’d also had really good, affirmative experiences of gay sex. I don’t really recognize, for example, a lot of the descriptions of what gay male culture was like in the ’70s. I don’t recognize my own experience in that. There’s this – largely literary – history which has come down of what gay male sex was like – how gay men related to one another. But, some of the most tender, open, vulnerable, authentic moments in my own sexual autobiography are moments that involve the relative anonymity of public sexual culture in New York City in the late 1970s. And, I would dishonor the achievement that the very existence of that culture represented if I said, as many people said, well that was a bad world or that I was excluded or had nothing but bad experiences in that world.
Surely, I also had some of my most profound experiences of racism in that world. But, I had some wonderful moments that shaped and affirmed my right to be sexual, as a result of my decision to participate in public sexual culture in New York City – specifically gay, public sexual culture. I feel the passing of that world with a profound sense of loss. There are other people that have taken the position that that whole world was a world well lost. I think that, in time, we will come to recognize how crucial gay public sexual culture was, to creating the conditions of possibility for political consciousness and political action. Clearly, without that culture, there would have been no ACT UP. Even though many of the people were instrumental in ACT UP – or at least some of them – have also become associated with the demonizing of gay public sexual culture that has characterized the discourse on gay sexuality in the United States since the mid to late ’90s. I think even those people know in their bones that their very access to a public that even takes an interest in the lives of gay men and in the epidemic, as an historical matter, would not have been possible without the institutions that were built.

SS: I want you to be really precise in what you see as how gay male public sexual culture contributed to the creation to ACT UP or its power.

KT: First of all, there had been a legacy of activism from the at least 19 – at least 1974, of the emergence of gay politics that understood our sexuality to be both a ground of political action and a tool that could be mobilized to organize other people politically.

SS: Why do you say ’74?
KT: That period for me, that post-Stonewall period for me, represents the moment of emergence of a distinctive gay politics, which is not the politics of reform, which is not a politics that takes – accepts – the view of gay and lesbian sexuality as pathological sexualities. By 1973, American psychiatrists have rejected the definition of homosexuality as a mental disorder and that contributes to a collective sense of a gay self that I think was crucial to the creation of a gay consciousness as a political consciousness. But, on the specific question that you asked me – by 1983, clearly there was a network, a very dense network – for gay men, at least – of bars, of clubs, of bathhouses. There was, indeed, a kind of gay civil society outside the commercial realm of gay men who came together, because of the kinds of sex they liked, because of the kind of clothes they liked to wear, because of the kind of sports they liked. And so, there was a gay civil society that existed, and an experience – particularly through the shared experience – initiation – in the cities, at least, of coming out. There was a sense that there was a gay world, that we had made a world, and the existence of that world clearly made ACT UP possible. There was a Gay and Lesbian Community Services Center. Ten years before, no such thing had existed.

SS: What’s the relationship between the bars, clubs and baths and the Gay Community Services Center?

KT: What is the relationship?

SS: Is it the same people? Are you saying that the people who are in the subculture were the people who came to ACT UP?
KT: There was clearly – we’re talking about overlapping constituencies, clearly. I think that a lot of people came to ACT UP, though, who had never been to the Center, and who came to ACT UP out of, what I would call, a kind of pre-political understanding of AIDS, and whose political education took place in and through their participation in ACT UP. So, I’m not talking about fully formed, sophisticated, complex political subjects, because the bars, the baths were not understood as political places, but the point I’m trying to make is that – and here I want to defend the historical validity and necessity of identity politics – people understood themselves as having a shared identity – the narrative through which, the sharing of a common identity often took place was our coming out – our individual coming out stories. Those individual coming out stories stitched us into what was then called a community – a public entity. That existence, as a collective entity, in public, with its own, largely commercial institutions, was the raw material for the forging of a more politicized understanding of the relationship between the response of government and other institutions of power to HIV and the politics of sexuality – specifically the politics of homophobia, heterosexism – there were several names for it.

The service model of the Gay and Lesbian Community Services Center was, obviously, more closely allied to a political understanding of gay and lesbian identity, than was the life of the bars, the baths, etc. But, I do think that the bars, the baths, the clubs experientially made it possible for people to have an understanding, an understanding that they may not have been able to articulate, of pleasure, sexual and otherwise, as a political issue. And, of gay men, in particular, and gay men and lesbians,
perhaps more generally, as the agents in American culture of a project of social and cultural change, in which something like the right to pleasure might be taken seriously.

Although I don’t want to claim any simple, unmediated continuities between the world of the baths, the world of the bars, the world of the clubs, and political action, on one side – or the community services model and political action on the other – I do want to say, again, that the conditions of possibility for collective, political action, of the kind that ACT UP undertook – and in understanding specifically of culture as both an arena and an instrument for political struggle – those things would not have been possible, if people hadn’t shared this experience.

Because what emerged was a distinctive cultural politics – politics being practiced in a way that was absolutely unique and the aesthetics of gay life. An aesthetics whose central tropes were pleasure, sex, sexual play are written all over the textural or visual record of ACT UP, and, indeed, even of groups that were thought to be more mainstream, like Gay Men’s Health Crisis. So, that would be in the nature of a specific or of a specification of the relationship between that world, on the one hand, and the political project of ACT UP. People were quite self-conscious about matters of style, presentation, aesthetics. And, again, I say that what ACT UP may well be remembered for in the history of the later, new social movements is a kind of aesthetic politics. Very often, we would go straight from the meetings to some bar or club. Work would take place there.

**SS:** Which bars and clubs did ACT UP frequent?
KT: Well, we were in the West Village, but there was a sort of East Village contingent, and so a lot of the committee meetings that I went to, took place in the East Village. So, there were all those bars there – most of which, or at least some of which are still open. I remember going on more than one occasion, with people like Ortez Alderson – I remember him especially, because I loved him so much – to Julius’s, which is a bar I didn’t know. That was the other interesting thing for me about ACT UP – it introduced me to gay worlds within gay worlds, that I just didn’t know otherwise. I don’t think I had gone, for example, to La Escuelita, before I met people in ACT UP. And, of course, although we met at the Gay and Lesbian Community Services Center, there was something distinctive that people who either lived in or spent a lot of time in the East Village brought to ACT UP, that was very different than the more established, normative heterosexuals who lived in the West Village.

SS: Homosexuals.

KT: Yeah, right. We didn’t, at that moment, yet have the name for it. But, I think what we saw was, there were different constituencies who’d come together. It was a coalition in more ways than one, because one realized – what ACT UP taught you was that even the term sexuality or gay represented a coalition across – within itself – across race, across class, across ethnicity, across work, labor, professional, occupational difference.

ACT UP provided a way for understanding ways in which gay itself was this pluralistic, proliferating site that could be regimented. And, I think, in fact, in the history of gay civil society and political action, the queer/gay split was a split whose necessity
became clear, I think, to a lot of people as a result of their experience in ACT UP, which is not to say – you were there – that identity – coalitions are also about contestation and conflict, right? So that gay identity became the site for a lot of other struggles over, for example, what might be called the racial transparency that seemed to blind a lot of gay, white men – in ACT UP, especially – to their racial privilege. That’s why, earlier I was talking about the pre-political character of the understanding of HIV and of gay sexuality that a lot of people had, when they came to ACT UP. It was amazing to me, frankly, how naive a lot of the white gay men, especially in ACT UP, were about power, the nature of power, their relationship to power, the prerogatives of power. And, it made it possible for me to see and experience directly in a way that I hadn’t, I don’t think, until that point, the important political educational work that women of all colors and gay men of color had to do of the gay community as a whole, around these questions of sex, gender, race and power.

SS:  How was that education enacted in ACT UP?

KT:  Mostly through floor fights. I mean, just really acrimonious floor fights about whether or not the floor should support a demand coming from the Women’s Caucus that the CDC recognize infections and illnesses that seem to be specific to women with HIV, as part of the “official” definition of Acquired Immuno-Deficiency Syndrome. Whether or not the floor should situate its demands for greater and more vigilant research into drug therapies within a larger critique of the U.S. healthcare system and the racialized character of access to it and treatment within it. Whether the floor ought to authorize and support aggressive outreach to communities of people who were being
affected by HIV/AIDS, who didn’t come from the East Village, the West Village or the Upper West Side. Whether ACT UP should stand, as I once did, with a great group of people, on the corner of 125th Street and Lenox Avenue and distribute information about pediatric AIDS and invite people to come to the Monday night meeting. Or, whether there was no such obligation – even though it –

KT: It was people of color organizing, and the caucus was the Majority Action Caucus, which consisted of mostly Latino and African American men. And, I was trying to remember earlier today whether I could put my finger on a date, but I couldn’t. There were a number of us, I think, who realized very early on that on race, the overwhelming majority of the people were coming to those meetings had no analysis at all of what racism was, how they were implicated in the structures of racialization and racism – had no sense of themselves as being raced. And, again and again, we found ourselves frustrated, even after the founding of caucus, by the way, by a degree of cretinism – just from a purely tactical point of view – before we get to questions of principle. A degree of ignorance, of such profound ignorance about issues of racial power, privilege – white skin privilege – the racially specific character of people’s experiences with the healthcare system – a whole range of issues – that we felt it necessary, particularly as members of the populations which, together, made up a majority of the people living in the city hardest hit by HIV/AIDS – to have our own presence and our own space, within ACT UP.

I was talking earlier about this question of outreach. We felt that acutely and I can remember going with Robert Garcia, Ortiz Alderson, a few other people, to a
meeting – I don’t know how we heard about this meeting – in the basement of the Abyssinian Baptist Church. And it was a group of cult-nat (?) African-American physicians, who were meeting to talk about what the African American community should do about HIV/AIDS. And, as one of the point people for the Nine Days of Action, I’d already gotten together with a group of people who wanted to work on these issues anyway and so, we made connections with people in Harlem. Somebody had a connection with Jesse Jackson who agreed to write a very eloquent letter supporting this idea that we had, as part of the ACT NOW actions, for a day of solidarity and remembrance in churches in New York City – predominantly black and Latino churches in New York City – for a day of solidarity and remembrance of people who were living with and/or people who had died from HIV/AIDS.

And so, this mobilization as a caucus – and here, I’m going to say something which is in direct contradiction to what I said a few minutes ago – this mobilization as a caucus was not a mobilization that was the product of shared identity, as people of color, but of shared interest in forcing the floor to come to terms with the fact – I must have said, more than a few times in the meetings – that there’s no such thing as “The AIDS Epidemic”. There are several epidemics. And this, at a time when people were still dying in horrifyingly high numbers – every week it seemed – from all communities. The fact of the matter is, is that the gay, white men who are getting sick, for the most part, had earlier and better healthcare and died under conditions that were materially superior to those of people of color who were getting sick – whose first point of access to the medical health care system, as in so many other cases, was through the emergency room.
And so, we felt the need a) for an organization site within ACT UP, that could generate the terms for a certain analysis and critique that simply seemed to elude most of the white gay men in the organization. And which could undertake and present to the floor actions that involved coalition with groups that weren’t likely to come to the Monday night meetings. And, finally, we thought the caucus could serve as a kind of conscious of ACT UP on these issues.

So, I remember quite clearly when the newly elected David Dinkins was considering who he would appoint as his Health Commissioner and he seemed to have arrived at a decision to take a fairly obscure Health Commissioner from Indianapolis, a guy named Woodrow Myers, and put him in the job. Apparently, the intelligence we were getting from AIDS groups in Indiana was that this guy was, if not a disaster, was problematic. And people of color wanted to have meetings with officials in the first African American mayoral administration in the history of New York City. But, other people in ACT UP – they were white, gay men – thought that, no, we had to take to the streets. So, what did they do? They burned effigies of David Dinkins, not knowing – and this is the irony, given their sophistication about symbolic politics and the politics of culture on so many different levels – that there’s a whole history that they were invoking that was racist and which could only hurt their cause in the eyes of people, who saw these white guys burning this effigy of New York City’s first Mayor of color.

SS: **Was that brought up on the floor?**

KT: And it was brought up on the floor. We were angry. A lot of times, it was a simple saying of it that made people see. I remember talking about it on the floor, to
make people see just how stupid it was, even if they weren’t committed to an anti-racist politic. And there were any number of people who said, look, there will be no effective political mobilization for a progressive AIDS policy in the United States, New York State, New York City, that does not have an understanding of itself as an anti-racist movement and as a movement committed to gender equality and to economic justice.

But, there were any number of people – again, gay white men – who had been raised, before they knew they were gay, to this notion that they were where they were because of merit – that the world belonged to them. That the way things were was, basically, the way things ought to be. And then, they have the shock of being marked as queer and of being subjected to a politics of abjection, because people were dying. So, people who had been able to live their lives in the closet as gay men were being outed by the fact that their bodies were giving out on them. And that sense of not being willing to acknowledge their investment in the structures of social and economic and gender and racial power – even though that very same structure was killing them – was one of the most painful things in the world for me to watch, because these were smart people.

But, this willful refusal to recognize that their investment in this world was also killing them, because it was occluding a vision of the only kind of politics that would be adequate to the crisis we were facing. That willful refusal, to this day, is, for me, one of the most powerful examples of the strength of white supremacy as an ideology and as an institution – the way it can make white people, effectively, commit suicide, in its name, and not even see it as such.
SS: Can you tell us the names of some of the black men and women who went through ACT UP in the course of the time you were there?

KT: Well, our numbers were not that great, frankly. But, in this little group, there was Ortez Alderson, who had come to New York, I guess, from Chicago, who was the most militant queen I had ever seen. He seemed to derive a perverse pleasure from threatening to chain himself to the desks of powerful officials. He would get arrested anytime. He did not care, because he had nothing to lose. Other people who have gone on to do important work was Keith Cylar, who went on to – there was a committee – it’s so funny, since it became organized, I can’t remember anymore what it was before it became an organization. There was a housing committee which became Housing Works, and Charles King who was, actually – who is, a white guy – and Keith was involved in the Majority Action Caucus. You could count our numbers on one hand. I’m trying to remember black women who were involved.

SS: Katrina Haslip.

KT: Yeah, right.

SS: Did you work with her at all?

KT: I know I worked with a group of women who were interested in these issues, but I don’t think we worked together.

SS: Cathy Cohen came through by the time –

KT: That was after I’d been involved. I think I was no longer really that actively involved, by the time Cathy Cohen came through.

SS: Michelle Adams, I remember.
KT: Michelle Adams – I remember that name.

SS: And the men – Randy –

KT: Your memory is very good. Williams – Dan Williams, I remember. That was a very unfortunate history. It was a very small group, but the Majority Action Caucus was, at least, a biracial caucus. There were very few Asian Pacific Islanders involved in ACT UP, in the early years. But, I remember Robert Garcia who was Chicano.

SS: What was the relationship between ACT UP and the Black AIDS Mobilization?

KT: At the time I was involved, there was none.

SS: Did it exist yet – Black AIDS Mobilization?

KT: You know, I don’t even know.

SS: To what extent do you trace the arguments within ACT UP about access, to the current crisis of global access, regarding AIDS medications?

KT: One wants to be very careful here, because the global conversation – not really a global conversation, it’s a regional conversation, frankly, right? And, it’s a conversation – the terms of which are being forged by activists in those specific regional contexts, who have their own understanding and their own analysis of health and of healthcare delivery systems, and whose political experiences were not or have not always been marked by a trajectory like the one that characterized that of AIDS activists. That said – I mean, I’ve had more than one person tell me that the example of ACT UP and, specifically the debates about access within ACT UP, have informed their politics. But, I
wouldn’t want to claim – I wouldn’t want to make any grand claims about ACT UP’s contribution because the ACT UP New York debate, I’m sure, about access was very different than the ACT UP Philadelphia debate, or the ACT UP Golden Gate/San Francisco debates about these issues, because the experiences were unique in each city.

SS: Before, when you were talking about what areas most revealed the conflicts of consciousness within ACT UP, one thing that you talked about was changing the CDC definition, and, of course, ACT UP did achieve that. In your understanding, where did ACT UP end up on access?

KT: They ended up in a better place than they started, but ACT UP before the Housing Works/tax spin-off – which is the ACT UP I knew best – TAG spin-off – never had a thoroughgoing analysis of the degree to which the commodification of healthcare in a capitalist economy, such as that of the United States, and the commodification of drug therapies, represented a barrier and an obstacle to this vision. Which was a slogan at demos – that “Healthcare Is A Right, I say Healthcare Is A Right.” People seemed unwilling, really, to let themselves be taken all the way through the analysis toward which that intuition that healthcare is a right, would seem to point. Can we stop the tape for a minute?

SS: Two last questions. The first one is, you recently went to South Africa – was that AIDS related?

KT: No, actually, I went for a conference on the questions of reconciliation and justice in post-apartheid South Africa. I’ve been doing some work on the Truth and Reconciliation Commission. We published some stuff on that.
SS: In that light, do you think that America will ever come to terms with how it treated people with AIDS?

KT: No. What reason is there to think? I thought there was some possibility of that happening, for a brief moment in the ’90s, in the Clinton administration when he was acknowledging certain other forms of injury that had been committed by and in the name of the U.S., in other parts of the world. No – why should it? I think the common sense clearly still is, is that people who get AIDS in this country as a result of the kind of sex they have, or because they use certain kinds of illegal drugs, are responsible.

SS: Here’s my final question. What are you most proud of, of all the work you did in ACT UP?

KT: It was very moving to me, to be in a little church called the Philadelphia Baptist Church in Harlem, during ACT NOW – the Nine Days of AIDS Action. And to have been a facilitator – I guess that’s a good term – of some of the first conversations in that little congregation, in which people felt that they could acknowledge that they either had AIDS, or that people in their family were sick, or that people in their family had died – so that people could name and acknowledge to one another, in that context, particularly, which, because of my autobiography, meant a lot to me.

And, I must say, there was another moment in connection with that – standing in the well of one of the Baptist churches up in Harlem, as a result of the very deft and generous work of Calvin Butts – the Pastor of the Abyssinian Baptist Church – before, I think, it was called the Metropolitan Baptist Minister’s Association – explaining to them why they should endorse this day of solidarity and remembrance of people, living with
HIV/AIDS. Many, many years after that, people were still having problems getting communities of color to acknowledge the fact of HIV/AIDS in their communities. So, I like to think that this was an early effort in that project. And it wasn’t a typical ACT UP action. And, as I said, there was a very small group of people who were involved. I remember Maria Maggenti being one of the people who sort of stood in the corner, there, with the 1-in-61 poster that Gran Fury had developed. I think it may have been their first poster – certainly one of their first posters. And, that possibility – taking the resources within a predominantly white, well educated, if not well off, comfortable community and using those resources to do work in other communities meant more to me than anything else.

It was an incredible time. I remember one six month period during my time in ACT UP, I was on sabbatical, and I just spent all my time doing ACT UP stuff – two or three committee meetings a night, in addition to the floor meetings. That was a crucial time for my political education and it was prevention work for me. I realize that it was therapeutic in that sense, although, I understand that therapeutic work is not political. And, I think this brought a lot of other people to ACT UP – this idea that, well, if we go to these meetings, and if we go to these demonstrations, then we’re not giving into a sense that we’re powerless, that there’s nothing that can be done, that we’re all going to get infected, that we’re all going to die. We could fight back, right? That was the idea. But, the fighting back – the benefits, the value of the fighting back was not just instrumental in contesting AIDS policy, or the lack of AIDS policy, but, it was expressive, because it meant that we were asserting – it gave me, at least, a chance to
assert my agency with other people, in the face of this experience of being assaulted or indicted – to use a legal term – at the very level of my desire.

So, the sex positive, gay affirmative, politically empowering force that was in that room and that were in the streets of New York or DC at ACT UP actions – I do feel it saved my life. And there was some great sex that came out of it, too. My roommate and I went to our first ACT UP meeting together, and the most beautiful boy I’d ever seen was standing across the room, on the third floor of the Center. So, there’s that history at ACT UP, too.

SS:  Did you ever get to meet him?

KT:  Oh yeah. [LAUGHS] OK?

SS:  Thank you, Kendall.

[END OF INTERVIEW]