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Interviewee: **Robert Vazquez-Pacheco**

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Interviewer: **Sarah Schulman**

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**ACT UP Oral History Project
Interview of Robert Vazquez-Pacheco
December 14, 2002**

SARAH SCHULMAN: Let's just start, for informational purposes, with you saying the name, the date, the address of where we are, and how old you are.

ROBERT VAZQUEZ: My name is Robert Vazquez-Pacheco. Today is December 14th, 2002, and I am forty-six years old. We are in my apartment at 327 St. Nicholas Avenue, which is in Harlem.

SS: Thank you, Robert. My first question is, do you remember the first time you heard the word "AIDS?"

RV: I'm trying to think. I don't remember the first time I heard it. It might have been in 1981. But I remember reading *The New York Times* article in Jones Beach. I was in Jones Beach with my boyfriend, and we had taken the Sunday *Times*. In perusing the *Times*, we read that article about the cases of the five—I think it was five—men in San Francisco, or something like that. That is my clearest memory of that.

SS: So who were you that day?

RV: Who was I that day? Let's see, I was what—twenty-four or twenty-five years old. I was with my boyfriend, Jeff. We were living on the Upper West Side, before it became chic. Where was I working? I was working for a lighting design company. I was studying lighting design.

SS: And you guys were living together?

RV: We were living together.

SS: Did you think that was the love of your life, and that this was—

RV: Yeah. Yeah. We were together for six years, until he died. He was diagnosed with KS in 1981, in September.

SS: So how much time passed between that day and Jones Beach?

RV: Months. It was in July, because it was July 4th weekend that the article came out. His birthday was in September of that year. I think it was 1981 when the article came out, so—what? July, August, September, three months.

SS: And had you known anybody else in those three months that—

RV: We had heard stuff about, you know, people being sick. I remember in 1980 we had started to hear stuff. Of course, in New York it was like, “Oh, those sluts in San Francisco are getting some disease.” So that’s what we had heard. So there were vague stories about it, and no one really knew anything.

SS: So the first person you knew who had AIDS was your lover.

RV: Yeah.

SS: Wow.

RV: Yeah. He was diagnosed—it was amazing. He was diagnosed on September 9th, 1981. I remember it because it was his thirtieth birthday. His doctor called him in to tell him the results of the tests. I had organized a surprise birthday party for him. He called me at my job and he said, “My doctor called and told me to meet him at his office at New York Hospital. So can you come meet me at the hospital?” So I went to meet him at the hospital. He was coming out of his doctor’s office when I got there.

SS: So when he went into the doctor, did you guys sort of know what was going to happen?

RV: We knew something was wrong with him, because he had a couple of lesions. And they had found some lesions, I think, internally. But nobody knew what it was.

SS: So what did the doctor say to you?

RV: Then the doctor said that he had this cancer. Then as time passed, we learned that it was GRID, that turned into AIDS. But I remember, the old New York Hospital had this huge lobby. I don't know if you remember New York Hospital had a beautiful art deco lobby, a big lobby that you walked into in the hospital. It looked like a hotel or a train station. I remember he came down in the elevators and I saw him. He started sobbing when he saw me, and we sat down on a bench. I grabbed him and I was holding him, and then I had to run to the telephone to call my friend to say, "Call everybody, the surprise party is off." Because people were getting ready to show up later. I was supposed to take him out and hang out, and people were going to show up at our apartment later. So I had to call up a good friend of mine and say, "Call everybody to say 'no surprise party.'"

SS: So how did you guys proceed? What were his treatments?

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RV: He went on chemo not too long after that. Jeff was a nice Jewish boy from Queens. He grew up in Long Island City. His family lived in Queens. His family was fairly traditional, so they were all freaked out about the fact that he had a Puerto Rican boyfriend to begin with. I don't know, I think we just sort of negotiated. We didn't know what was happening, so we just sort of negotiated it day by day. He and I had only been together for about six months before he found out that he had KS. He said to me, "Do you want to leave? Do you want to end the relationship? I don't know what's going to happen." I was twenty-five, I think. I said, "No, of course not."

He worked. He was able to work. He died in 1986. He was able to keep working. I mean, he got progressively sicker. We lived in a fifth floor walk-up on the

Upper West Side, and he would do things like bike to work. He would exercise and stuff. But as time passed, he just got more and more ill. I don't know. First of all, it was such a long time ago. We got along really well.

SS: Did you guys hook up with other people who had AIDS?

RV: I think we bumped into someone, like in the mid-1980s, at a party, that then Jeff developed a relationship with. There weren't a lot of people. In the early-1980s, there weren't a lot of people that we knew in our circle of friends that knew about it. Everybody was sort of worried and scared, and we started to hear the stories about people getting sick and dying. But we didn't see a lot. We started to slowly sort of socially meet people. He wasn't meeting anyone, like at the doctor's office or anything. And this was way before anything like support groups, or anything like that.

SS: So when did you first see that there were starting to be organized groups of people with AIDS, or people talking about AIDS in an organized way, or getting medication?

RV: I think it was probably in the late-1980s. We were starting to see more people in 1984, 1985, if I recall. We used to both work on the Gay Switchboard. I think we were both on the Board, and I used to do the trainings with them. Now it's the GLBT Switchboard of New York, or whatever. But we used to work there, so I remember sort of beginning to incorporate a curriculum of basic AIDS information into the information that we had at the switchboard.

SS: And how was he getting treatment information?

RV: He actually wasn't getting—there was no treatment information out there. He was dependent on his doctor, who was giving him whatever the treatment was. I

don't even remember what the treatment was, the chemo was, at that time. That was it. We really didn't know anyone that was out there that was doing any kind of treatment activism, or advocacy, or education. None of that stuff existed.

SS: Did you hook up with GMHC at all?

RV: I'm trying to remember when GMHC started. I think he tried in the beginning, early on in GMHC. He called them. They never called him back. He called them again and they never called him back. After that, he just let it go.

SS: How did you deal in terms of yourself? Did you feel that you might be infected at that time?

RV: I sort of figured I was. I had an assumption. This was in the days before the antibody test. I realized that I had had swollen lymph nodes since 1980, or something like that. So in sort of going back, I probably remember about the time I got infected. It wasn't Jeff. Who knows who it was. It was the late-1970s.

SS: How do you know?

RV: How do I know?

SS: That that's when you got infected?

RV: Simply because looking at the symptoms, about the flu-like stuff. And I remember getting one day, having a flu that wasn't a flu, that I stayed home from work for. I remember there was a lot of drama for me staying home from work, because I was out of work for about three days. But I wasn't necessarily running a high fever, but I was feeling sick. So in hindsight now I'm thinking that that might have been it, in 1980, sort of in the fall.

SS: So here you are, this really young guy. You're in your late-twenties. Your lover is extremely sick. You're worried about yourself. Where's your support system? Your families?

RV: My family, my friends, that was my support system. I didn't go to any organizations, or anything like that. So it was basically family and friends who were my support system. And my family was great. My family was really great, so they were very accepting.

SS: And Jeff's family?

RV: Jeff's family was a different story. I'll give an example. His sister and my sister were pregnant around the same time. When they gave birth, he and I went to the hospital to see my sister. My sister gave birth first. We went to see my sister in the hospital. We walked into the hospital room. My sister was there and she had my nephew there. This was maybe 1984, I think. She said to Jeff, "Here, hold the baby." And this was in 1984, when people were still sort of trying to figure out what infection was and everything else. They knew he was sick, but my sister was like, "Here, you're a member of the family. Hold the baby." So he was holding the baby and playing with Christopher. When his sister gave birth, she never let him touch the baby. That was a big bone of contention. That really hurt him and that made him draw away from his family.

So my family was much more—he was very much a member of the family. For example, he was expected to participate in all the family events. It was like, "If it's Christmas you show up with Christmas gifts. We don't care if you're Jewish. You're coming. You're participating in this." So he was part of the family, whereas his family didn't really want to have anything to do with me at all.

SS: So what happened when he had his first hospitalization?

RV: It was rough. They also didn't want to learn anything, which was sort of scary. One of the things I did with my family was I sat down with everyone and I told them, "Okay, this is what we know. This is the information I have." I said, "Jeff, sit down with your mother and father and tell them this." They didn't want to hear it. They really didn't want to hear it. They were frightened, I'm assuming now. So in his first hospitalization, his mother just went hysterical. She was like, "I don't know what to do." I was like, "Relax, calm down."

SS: So you were taking care of them and him?

RV: Well, to the extent that I could. She was very resentful of me. She would—it's very funny. She would visit Jeff during the week, or sometimes she would just stop by. She was used to being able to go to his apartment and she would clean his apartment. I moved into his apartment. She would clean his apartment, and after I moved in and we were together I said, "Tell your mother not to come and clean the apartment, alright? You and I can clean the apartment. It's okay." So he was very close to his mother.

But when his parents would come to visit sometimes, they would come in from Queens and they would take him out to dinner. So they would come to our apartment, hang out for a little, and then go out to dinner. I never went on those with them. But she would come in and she would clean the bathroom while she was there. One day I went into the bathroom and found toilet paper stuck to the walls, because she was cleaning the bathroom with toilet paper. So the next time she came over, I took all the cleaning

supplies and I put them all in the middle of the bathroom for her. I said, “If you’re going to clean my bathroom, please clean my bathroom properly.” So she stopped after that.

It was very interesting. I thought to myself, “If I were a woman, I’d probably have the same problems with his mother.” She didn’t want anyone to come between whatever relationship she had with her son. I think she felt very threatened, and because I wasn’t afraid of her.

SS: So your lover’s in the hospital. At that point, did you have a diagnosis for yourself?

RV: No. I didn’t get tested. Well, I also had a doctor who was like, “Well, you seem relatively healthy, let’s not worry about this now.” And there was no test until 1985, or so, I think. I’m trying to remember when the antibody test came out. So I didn’t go get tested until later on, but I just sort of assumed that I probably was HIV-positive. And I wasn’t really worried. It was interesting—it was not a worry for me at all. I wasn’t scared or anything. I was more interested in—for me, my focus was helping Jeff get through, make it through stuff. Taking care of Jeff, that for me that was more important. I wasn’t worried about that for myself.

SS: So as he got sicker, did you guys start to plug into arising systems?

RV: We actually didn’t. He didn’t have the desire to. He really did not have the desire to. When he died in 1986, he wasn’t going to any support groups. He had a couple of friends who were HIV-positive as well, or who had AIDS actually. But that was it. That was sort of the network. He wasn’t really interested in doing anything more than that.

SS: So then you didn’t start plugging in until after he died?

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RV: I didn't plug in until after he died, you know. The way I went to ACT UP is I went to the first anniversary ACT UP party. They had the talent show.

SS: Where was that?

RV: Oh God, I don't remember. It was some club downtown. I forgot where it was, now. That was my first experience. I got dragged by a friend of mine, who said, "Oh you know, there's this group, ACT UP, and they're having a party, their anniversary party. We should go." And I wasn't even aware of what they were doing.

SS: So what was the party like?

RV: It was a talent show. There were a lot of in-jokes. My friend, David, and I were watching everything that was happening. Everybody was laughing at all of these jokes and all of these references. We were like, "This is obviously something that means something to them, and not to anyone else." So it was very much a familial, I guess, setting. So everybody knew each other.

SS: Do you remember any of the people you saw that first night?

RV: I remember Vito Russo. Do I remember any of the acts that were there? I remember someone doing some Broadway show tune. I detest Broadway show tunes, so I don't remember the song. But someone was doing some Broadway show tune that had some kind of leather overtone. He pulled out a whip, and stuff like that. I don't remember very much beyond that.

SS: So what made you go back?

RV: Then I found that they actually were doing something. It wasn't just a party. ACT UP was actually doing something. And I used to work at the—no, I wasn't working at the Center yet. After that, we had heard about ACT UP. They had fliers and

information there. My friend, David Kirschenbaum, who was my best friend—David and I decided that we were going to go to a meeting. That’s what we were doing—I’m sorry, I can’t even remember my own history, let alone anything else. We were working with sort of a CR group that was for gay men that was called—what was it called? Gay Circles, I think. It was a gay men’s discussion group. We were in the Center and we would meet on Mondays. I ran a group on Mondays, so I would walk through the ACT UP meeting coming out of the Center on Monday nights. So I think part of it was that. Then David and I finally decided to go to an ACT UP meeting.

SS: So what was it like? Do you remember?

RV: We walked into a meeting in the old Center. We walked into the meeting and I said, “Wait, let’s look around.” Because David had said, “Well, where do we stand?” I remember saying to David, “We stand where the power is.” And I looked around the room. David was like, “Where is that?” I went, “Wait.” I just watched, and I went, “There.” Of course, I’m standing next to Avram Finkelstein, Maria Maggenti, Maxine [Wolfe], literally all of the big cheese in ACT UP. That’s where we went to stand immediately.

SS: Why did you want to stand near power?

RV: It made sense, you know. I’m a control queen. I don’t know why. For me, that was more interesting to see the people. I was curious to see, not necessarily who—I could see the membership, but I want to see the people in charge, because the people in charge are responsible in some way for the direction that the organization moves in, that the group moves in, despite the fact that ACT UP was, quote unquote, leaderless.

SS: But had you ever been in a gay group that had women in leadership?

Because you just named two.

RV: Yeah. I was in the Gay and Lesbian Switchboard. The Switchboard had women on the board, and women members, and women in leadership.

SS: So that wasn't new.

RV: No, not at all. And I come from a matriarchy, so women in charge was not surprising for me.

SS: So how did you plug into ACT UP? What was the first activity?

RV: We started going to meetings. What I realized after Jeff died was that I wanted to do something else. I didn't want to do something sort of social servicey, because I wasn't interested in doing social service stuff. I wanted to do something else. That's why ACT UP interested me, because of the activism, because of the pull of the political consciousness about AIDS that they had. So that's what interested me in the group. And also I think because I was angry. I was very angry about the fact that my lover had died. I went through those early days of the orderly leaving the food tray—the couple of times that he was hospitalized—on the floor outside his room, or the nurse putting on the space suit to come in to talk to him.

SS: What hospital was that?

RV: New York Hospital.

SS: Did Jeff find that depressing, or was he too sick to really respond to it?

RV: I think he registered it, but he was too sort of scared about what was happening. So I was the one that would argue. I was the one that would go out and make a scene in the hallway: “Why are you putting the food on the floor?”

SS: What did they say?

RV: They would give bullshit reasons, like, “Oh, I’m sorry. We shouldn’t do that. We’ll talk to the orderly. And blah, blah, blah, blah.” Whatever the bullshit reason was. So I remember all of that, after he died sort of carrying all of that anger and frustration with me and wanting to do something much more active, or proactive. So that’s what drew me to ACT UP.

SS: Where did you plug in?

RV: David and I went to the meetings. I think my first public act in ACT UP—remember people would write on the board? The person who used the chalkboard had the most hideous handwriting. I was doing lighting design, so I used to do architectural lettering. So one day they were just writing something and I got really frustrated. I got up and I took the chalk from him: “Give me this.” I started writing in architectural lettering. Everybody applauded because they could finally read what was on the board. So that’s what I started doing. I started writing. I started being the person who was taking notes on the board, standing up in front of the room and taking notes on the board. And it’s funny, because I remember the sense of frustration, like, “I want to read this. I can’t read this.” And obviously, there is also the element of being a drama queen and not being afraid to step into the spotlight if necessary.

SS: So everyone could see you.

RV: Absolutely. So that’s where I started doing that. I just started writing the notes on the board. I was only one of a couple of people of color in ACT UP at that time.

SS: Who were the others?

RV: Ortez Alderson, Robert Garcia. Who else was there? I remember Ortez. I remember Robert. I think Dan Williams, although I don't know if he was there in the beginning. But I just remember there was just a handful of us. We started the Majority Action Committee.

SS: So how did you guys get together?

RV: You know, it was easy. It was 400 white people in the room, and I would see one black man and one Mexican man over there. So we saw each other. We stood out, as my grandmother would say, like a fly in a glass of milk. We started talking to each other because we realized that. And Ortez, I remember, would get up. If you recall, he would just get up in front of the room and start talking about the issues of people of color all the time, and haranguing the room about the issues of people of color.

SS: Well, he had a really long political history.

RV: Yeah, he did a lot of social activist stuff.

SS: Do you remember?

RV: Not a lot of it. I know he was from Chicago, and I know that he did work in Chicago. I think he did work around housing and stuff like that.

SS: Wasn't he a Panther?

RV: I don't remember.

SS: Okay. Because I know Robert was not political at all.

RV: Right. Robert wasn't political at all. I mean, I wasn't that political either. I grew up at the end of the 1960s, so sort of the era of political stuff was already over.

SS: So was that the first committee that you were on, Majority Action?

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RV: I think actually it was. It was the first group or caucus, and with very few people of color. That was the first one. Then I remember running for At-Large. What was it? The At-Large Representative, I think, was the person in charge of the membership stuff. I remember the election, because I was running against Emily. I remember getting up and saying to the room, "This is a white liberal's nightmare. You have a person of color and a woman that you have to vote for." Despite that, I got elected. I did that for a while, I think, and then I just got tired of it.

SS: Let's just go back to Majority Action for a second. What was the story there? What did you guys do? How did the group evolve?

RV: I think that Majority Action started off with the need for the very few people of color to come together and do work around the issues that were affecting people of color, and how the epidemic was different in communities of color. So I think that was our reasoning for being there. That was certainly part of my reason for being there.

SS: And what actions did you propose?

RV: Wow. What actions did we propose? It's terrible, I don't remember. I know we did a couple of things, because I remember doing the—oh God, you know what, I don't remember, Sarah. I really don't remember.

SS: More and more people of color came to ACT UP at one point.

RV: Yeah, later on.

SS: And did people come into Majority Action?

RV: I think they did. But by the time that we were seeing more people of color in the Majority Action Committee, I was doing the at-large stuff. So I had pulled myself out of Majority Action, because I was already living ACT UP. I was one of those insane

people who had a full-time job and then was doing the ACT UP work until whatever hour at night. So I moved from Majority Action into doing the at-large stuff, sitting on the steering committee.

SS: Let me just ask one more thing about Majority Action. I know that there was a Latina/Latino Caucus, there was an Asian-Pacific. Did they come out of Majority Action?

RV: I'm not sure if they did. I don't think that they did. I think they started the same way that Majority Action did. There were a bunch of Latinos that came to ACT UP that started the Latino Caucus. It was the same thing with the API Caucus. I don't know if they actually started from Majority Action or not. They may have after I was gone.

SS: Also because Ortez died pretty early.

RV: Yes, he did actually.

SS: And I think that may have been before those other caucuses began.

RV: Yeah, I think he did too. I think Majority Action was—part of it was that after he died it was difficult for them to keep moving, because he was such a dynamic organizer.

SS: Okay, so you were on the Steering Committee. So who else was on there with you, in the power center?

RV: Michelangelo Signorile.

SS: And he was the media guy?

RV: He was the media guy. Who else? Debbie Levine. I forgot what Debbie did. Who else was on the Steering Committee? I'm trying to place myself at the table. I

think someone from what is now TAG, which was Treatment and Data, which was WAVE 3.

SS: So what would be like a kind of discussion that would happen at the Steering Committee? Were you guys really steering?

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RV: That's a good question. My interest in the at-large thing was in making sure that the membership was sort of up and functional. I would do like introductions to people who came to ACT UP the first time. I would have conversations with them. I remember that one of the things I would do at every meeting was tell people that I was giving them official ACT UP permission. If they wanted to go home instead of going to a meeting, to take care of themselves, that they could do that. It's funny because I still bump into people now, years later, who tell me, "I still take your advice." I'm looking at them, like, "What advice?" So I remember doing stuff like that. And I was in charge of the membership information.

SS: How many members were there?

RV: I think we had about—if I recall—about 200 sort of official members who would actually put their names to stuff.

SS: And how many people in a meeting on Monday night?

RV: Oh man. In a meeting on Monday night we could have upwards of about 400 people. I remember that that place was mobbed.

SS: So as people would come into the organization, you were the person?

RV: Yeah. I was the person that gave them sort of an introduction to—I mean, I would pull them out of the meeting. At the beginning of the meeting, I would say, "If anyone's here for the first time, let me just pull you out of the meeting just to give you a

little background, maybe twenty minutes of background about what is happening here so that you can go back into the meeting and do whatever you want to do.” So I did that with a whole bunch of people that would pass through. So it was weird because a lot of people saw me, and knew who I was, but there were so many people that I didn’t know, that I might engage with or not engage with. So the weirdest thing was traveling around the city and bumping into the people who would go, “Hey Robert, how are you?” And I wouldn’t know who—it was like, “Did I sleep with you? Fuck you? I don’t know who you are.” So it was a little disorienting sometimes, because I felt as if I was under surveillance all the time because I kept bumping into people all over the city that were attending ACT UP meetings that would say, “Hey Robert, how are you? Are you going to such-and-such?” And, “Yeah. Hi, who are you?” So that was a little weird.

SS: But would you—you can tell the truth now. Did you steer people towards actions and committees that you felt more comfortable with, and away from things that you thought were not really going anywhere?

RV: No, not at all. For me, I would let people make their decisions about what it was. It was like, “These are the different committees. Do what you feel comfortable with.” What I would tell people was, “Do what you realistically think you can do. All of the committees were a lot of work, so please do something that you’re interested in instead of something that you think might be fabulous that you might quickly lose interest in. We need people who are going to be working, as opposed to people who are just sort of posing.” That was it. Aside from that, the steering committee would decide stuff about financial stuff—you know, spending money on stuff, approving money on stuff. Essentially what we would do was that we would sort of operationalize what the

membership decided. So the membership would say, “Yes, we’re voting on doing such an action.” And in the Steering Committee, we would say, “Okay, well what does that mean? We need X amount of dollars. We need this, we need that. We need to come up with a press kit.” So we would help to do stuff like that.

SS: So what was like an early action that you participated in, that you felt really good about?

RV: I would say the one that I really worked a lot on was the FDA—Seize the FDA.

SS: What did you do?

RV: I was helping the marshals. It was the first time I got arrested. It was very funny, I was very surprised because I was one of the marshals. I was telling the cops, “No, you don’t understand. I’m one of the people that’s trying to keep the peace here. Don’t arrest me. This is silly.”

SS: What was the goal of the action?

RV: Well, the goal of the action—we went off to Rockville, marching around the suburbs of D.C., to get the FDA to change the drug approval process, because it took way too long. I remember it was a huge national action. We actually closed down the building.

SS: What had we done before that?

RV: I remember there was—I heard about and saw footage on the first ACT UP action.

SS: No, I mean we, around the FDA.

RV: Oh, you mean how did we organize around it?

SS: Before we decided to go to the FDA, to actually go there, what were the steps that we went through to try to get the approval process changed, before we actually went to—

RV: That I don't know. I was not one of the treatment people.

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SS: Okay, so you were not someone who was negotiating with the government. You were an action person who came in.

RV: I was an action person. I was like doing marshalling and helping at the marshal trainings and that stuff. That's what I was doing. I wasn't part of the thing. I actually did do—part of the FDA action was to do teach-ins. I remember volunteering to do part of a teach-in, which was just explaining the clinical trial process. So I remember doing that. I think that was the first time that ACT UP had actually done that, had actually sat down and done teach-ins weeks before the actual action. So everyone knew why we were there and what we were doing, as opposed to like Wall Street II, where it was just like we were going to take over Wall Street. When they shoved a camera in someone's face, people were just—

SS: Okay, so were you diagnosed at this point?

RV: Yes.

SS: And were you in a clinical trial?

RV: No.

SS: So you were not on any medications?

RV: No, I wasn't in any treatment at all.

SS: So how did you learn how the clinical trial process worked?

RV: I did research.

SS: And how did it work, before that action?

RV: Well, the clinical trial process remains the same. You have Phase I, Phase II, Phase III trials. So the process, in and of itself, remained the same. Part of what we helped to change was we did stuff like—I think ACT UP affected the FDA's approval process in terms of stuff like compassionate use, to let people use the drug before it got widespread distribution.

SS: How does that work, exactly—compassionate use? Anybody who wants the drug—

RV: Usually the doctor will apply for it. It's a drug that's relatively successful, that they're seeing had some actual clinical benefit, so people are allowed access to the drug. Usually the doctor has to negotiate that. They get monitored by their doctor. So it's actually very useful. It helps people—especially people who have no other chance, or no other medications that are actually functioning very well for them.

SS: So that did not exist before?

RV: I don't think that it did exist—not in the form that it is now.

SS: So ACT UP won compassionate use?

RV: Most definitely, yeah. ACT UP won the compassionate use and pushed the compassionate use, definitely.

SS: Through this FDA action?

RV: I think so. At least that was the beginning of the process. I don't think I could say that after we all went back to New York, after we left Rockville, that the FDA had suddenly changed it. But certainly that was part of the pressure that we applied, in

addition to people going in and doing stuff like going to the drug companies and locking themselves in offices and stuff like that.

SS: What was the philosophy of marshaling?

RV: The philosophy of marshaling was essentially to keep our members and the folks who were at the demonstration safe, to make sure that they were not hurt, that they were not abused by the cops, and to keep it nonviolent, because ACT UP believed in nonviolence. So definitely it was to make sure that we did not become violent either, or that there was no violence perpetrated against us, but also to make sure that the people were not hurt.

SS: How did you do that? What were the techniques?

RV: The marshals did crowd control. We functioned sort of as a buffer between the cops and the demonstrators.

SS: Physically?

RV: Yeah. Sometimes physically we would stand between the cops and the demonstrators. So we would try to keep our folks back, and be careful, and try to keep people safe. We also, in terms of marching, we were the folks helping to do the chants and helping to move people around, if we were in a moving demo, or if we were walking in a circle making sure that people were moving and keeping an eye on people, and also keeping an eye on the cops as well.

SS: So at something like the FDA, how many demonstrators were there, would you say?

RV: I'd say several hundred demonstrators.

SS: And how many marshals would something that size require?

RV: Ideally, I would say let's say if there were 400 demonstrators, that it would be great to have like 75 marshals or something like that. I remember doing the marshal training, which was just telling people to keep an eye on the cops, make sure that you remain calm, keep an eye on the demonstrators, make sure that if it's a moving picket that folks are moving, that if folks are getting arrested make sure that we know who is getting arrested. So we would do stuff like that as well.

JAMES WENTZY: We need to stop.

SS: Oh, I'm just going to get more coffee.

RV: I was just corrected. It was the Coordinating Committee, because the membership refused to be steered.

SS: Ah, did we get that?

RV: The Membership did not want to be steered. We were the evil Coordinating Committee that was having all these meetings, all these secret meetings. I remember someone saying that—Petrelis getting up and saying this – secret meetings of the Coordinating Committee.

SS: Oh, Michael Petrelis.

RV: Our gift to San Francisco.

SS: Now wait, we've just gone over so much material. I want to go back a little bit in a little more depth. So let me just finishing the marshaling thing, and then I want to go back to Majority Action. So you say your lover had died. You were coming into this organization. You had a lot of anger. You, yourself, were diagnosed. You were not on any meds. And yet, the role you took on was peacekeeping. How did that fit emotionally and psychologically?

Tape II
00:00:00

RV: Hmm, how did it fit emotionally and psychologically? I think that for myself—and I'm just going to say this for me, although I've said it about other people as well—I think that part of what I was doing was that was the way I was in denial. I wasn't really looking at what was happening with my health. I was relatively healthy, but I wasn't doing anything aside from going to an acupuncturist that I had been to for years. That was the only thing I was doing. I think it was denial for me. I thought that, for me, the peacekeeping was probably the best way for me to deal with my anger.

SS: Did it help?

RV: I think it did. I mean, I certainly felt a great degree of satisfaction in doing the marshaling.

SS: Did you ever have an experience where either a demonstrator or a policeman violated?

RV: Not for me directly. Well, aside from at the FDA, where one of the demonstrators—at one point in the demonstration somebody broke a window. I remember I was standing right behind the cops, and two cops turned around and said, “Grab that one.” And I literally got arrested. The funniest thing is that I got arrested, I got dragged onto the bus where they were taking people, and I still had my walkie-talkie. So I was telling people, “I've been arrested and someone should come and get this walkie-talkie because I'm taking the walkie-talkie to jail with me.” Finally, I think we were able to pass it out the window, but it was really funny.

SS: You had no fear about being arrested?

RV: No, I wasn't worried about it. I actually wasn't worried about it. And sure enough, we got taken to some gym. We were held in some gym. And I remember a

bunch of lesbians were playing tampon basketball. They put everyone together in a gym and everyone was just hanging out, waiting until we got sent back.

SS: So actually being arrested was actually safe?

RV: In that setting, at that time. I would not get arrested in New York. I try not to get arrested in New York because Puerto Ricans disappear in the system in New York. So it was like, “Unh-unh, I’m not doing that here. I’m doing this in the national one, where they’ve negotiated all of this stuff, and where people are relatively safe.” But even then, I wasn’t doing anything to get arrested. I just got arrested because they turned around and grabbed me.

SS: So as more people of color came into ACT UP, and there started to be more caucuses, and then there was a whole contingent of women with AIDS who came in, how did that change the atmosphere, when the racial balance changed?

RV: You know, part of what happened for me was that when that racial balance started to change, I had moved out of ACT UP. I started working as the manager of the PWA Health Group.

SS: What year was that?

RV: Maybe 1989.

SS: So you were really in ACT UP for three years.

RV: Yeah. Also what happened was I became a member of Gran Fury. Then I moved into the next exclusive club in ACT UP, which was Gran Fury, from the Coordinating Committee.

SS: Alright, well let’s save that for a minute.

RV: Yeah, we’ll save Gran Fury.

SS: When people like Marina Alvarez and Iris de la Cruz—

RV: I wasn't there anymore.

SS: You didn't interact with those women at all?

RV: I wasn't interacting with them, not in ACT UP. I had already moved out of ACT UP by that point in time.

Tape II
00:05:00

SS: So when you were still in ACT UP, what were some of the ideological—

RV: There was a Women's Caucus. I remember that was starting up with Maxine—you were there—Debbie Levine, Maria, Amy, Alexis.

SS: Who was Amy?

RV: Was it Amy who used to do the marshaling?

SS: Amy Bauer.

RV: So I remember the Women's Caucus.

SS: And what was the issue? Do you remember?

RV: I remember one of the big issues was the AIDS designation, that they were not recognizing the opportunistic infections that women were getting as AIDS-defining illnesses. So pelvic inflammatory disease, and a bunch of other things like that, the CDC was not recognizing those.

SS: So that would be something that would affect women of color enormously.

RV: Absolutely.

SS: And how was ACT UP about taking that on as an issue?

RV: You know, ACT UP was very much historically a boys' club. Despite the fact that there were women in positions of power, it was essentially predominantly male.

Although folks were accepting of the issue, from what I saw it was always a battle for the women to get the issues discussed and sort of focused on. People were accepting once they did it, but it was never an easy situation.

SS: So even people like Maria and Maxine couldn't get—

RV: Well, they got up and they spoke, but that didn't necessarily sway the whole room and get everyone suddenly on board. I mean, it was the same thing, for example, when we talked about people of color issues. Everyone would just sort of like go into that stunned—"Don't call me racist, don't call me racist." It's like, "That's not helpful. Come on, work with us here."

SS: What were the people of color issues?

RV: Part of it was stuff around access and education. Part of what, for me, shifted in my relationship with ACT UP was that I went to work, first at PWA Health Group, which meant that I was doing sort of AIDS work during the day. I was not going to do AIDS work during the day and then AIDS work at night as well. So that made me move away from that directly. But what it also did, working at the Health Group, was I started to see a lot of other people with AIDS directly. And what I saw at the Health Group was it was predominantly gay white men who had access to the Health Group, and not people of color, because at the Health Group you paid for everything out of your pocket. It wasn't insurance at all. So the lower income people didn't have access to any of the snake oil that we were selling.

SS: Because it was a buying club.

RV: It was a buyers' club, yeah. It had been around about a year or so before I started working there.

SS: I still want to get back to, when you were at ACT UP, because you say “access,” what concretely were some of the issues or places where access came up?

RV: I would say information. I think that the ACT UP membership was remarkably educated about AIDS. Unfortunately, that information didn't filter out a lot into the rest of the community. It certainly didn't filter out into communities of color at all, because there were so few people of color there, and because the perception, for example, in communities of color was that AIDS was a disease of IV drug users. And nobody wanted to deal with IV drug users. I think it actually even took ACT UP a while to look at the issues that came around that.

SS: Who were the people in ACT UP who really pushed to serve IV drug users and address their issues?

RV: I think Keith Cylar, who is now at Housing Works. I'm trying to remember who else did IV drug user stuff. God, I don't remember.

SS: Well, like when you decided to start taking meds, what was the first thing that you took?

RV: Well, I started taking meds really, really late.

SS: You were already out of ACT UP?

RV: I started taking meds in 1995.

SS: So you were running the buyers' club, but you weren't buying?

RV: I wasn't buying. I wasn't taking any medication.

SS: Did you feel that there was a difference in information about medication inside ACT UP between people of color and white people? Like were the white people doing different medications than Robert or Ortez?

RV: We didn't have those—I can't say. I can't say because we didn't have those kind of conversations about, “What are you taking? What are you on?”

SS: Why not?

RV: I don't know. I think that one of the things that happened in ACT UP was that there was a presumed intimacy. Everyone thought that folks were really close and actually knew what was happening. There were a lot of people who didn't know anything that happened about anyone else's life. There were tons of people that I would see on a regular basis and could not tell you what even they did for a living, because we only interacted in particular areas and very specific areas, and that's all it was.

SS: But you were interacting with hundreds of people, so there's a limit—

RV: That's a limit, but even the folks that I knew—there were a couple folks that I became friends with and I was close to. Kirschenbaum was my best friend, so he and I—oh, David was on the Coordinating Committee, as well. He was the treasurer. Oh God, ginkgo biloba for me.

SS: Let's move to the parade of boyfriends, the social life of ACT UP.

RV: Well, you know, one of the things that happened when David and I went to ACT UP—one of the first things we realized when we went to the ACT UP meetings was, “There are a hell of a lot of cute boys here.” We said, “There are a hell of a lot of cute boys here.” So it was only later on that we realized that that plethora of cute boys didn't mean that they were available. It just meant that they were pretty to look at.

SS: Did you feel like they were not available?

RV: I think so, yeah. I think that, for me too, I had become very quickly a high-visibility person in ACT UP. For some folks, that might have been a deterrent.

SS: Really, not an attraction?

RV: Well, for some people. There were some people who would find it interesting. Relationships in ACT UP were very public—who was dating who. So for some folks, I think that was not something they were very interested in.

SS: Well, how did the sex/business mix really work in ACT UP?

RV: It's interesting. I think that gay men have sex the way that dogs sniff each others' assess sometimes—to familiarize yourself, to learn who is this person, so that they jump into bed to do that.

SS: To meet them.

RV: Yeah, to sort of meet them, as opposed to do anything else. There was certainly this “A” list of—what would we call them? We called them the “swim team.”

SS: Who was on the swim team?

RV: Matt—you see, I don't remember anyone's last name. I think Ken Fornataro was on the swim team. Adam. I forgot who else. I think we called them the “swim team” because they showed up in swimsuits at something that we did. So we named them the “swim team.”

SS: And they were like the most desirable.

RV: They were all very cute and very built.

SS: And were they available?

RV: Certainly not to me. I'm sure that they were available to others who were equally as cute and built is what I realized.

SS: But was there like a separation between flirting and sex, and doing work? Or was it all sort of one action?

Tape II
00:15:00

RV: You know, I would say not for me. Dating, for example, someone who was on the Coordinating Committee—we worked together and then we slept together.

SS: Who were you dating?

RV: Now I don't even know if he was now. Gregg Bordowitz and I dated for a while. I don't remember how long.

SS: While you were both on the Coordinating Committee?

RV: You know, I don't remember if Gregg was on the Coordinating Committee or not. I remember he did a lot of things. Certainly he was part of the Testing the Limits Collective, so I know that they were out there doing a lot of the recording of what was happening. But I don't remember if Gregg was on the Coordinating Committee or not.

SS: How did it change the experience to be involved with somebody who was also in ACT UP?

RV: You know what it was, it was all-consuming. And for a time, I think, that was satisfying to do that, to do all of the ACT UP work and be totally connected in ACT UP in all of these different ways in my life. For a while it was satisfying, then after a while it just got really oppressive.

SS: Why?

RV: I think it's hard to sort of sustain that level of interest or energy. It was like doing all this work and then the work never ended. The Coordinating Committee would end and then we would all go off to have dinner. Then some of us might go off to have a drink. And then some of us who were dating would go home together. So it never ended, in some ways. For me, I think, what substantially changed my relationship with

ACT UP was when I started actually working on AIDS, when I became the manager of the Health Group.

SS: How much did you get paid, by the way?

RV: I don't remember. Not a lot, it's non-profit.

SS: Because there were a lot of people from ACT UP who went on to paid work in AIDS. So what was that like, to move from volunteer activist to—

RV: Well, I mean, the fun thing for me was that working as the manager of the Health Group was still doing activism work, because none of that stuff was FDA approved.

SS: What drugs did you—

RV: Let's see, the drugs I remember were Dextran Sulfate.

SS: A real winner.

RV: Yeah, a real winner. Lipids—that's the one that I remember, the egg lipids. But then we also imported, before I left, we started importing—was it Amphotericin, which was not available here.

SS: Well, how did you get Dextran Sulfate, for example?

RV: We would buy it. We would buy it from Japan. We would get it shipped in. You could order—the FDA allowed for folks to order a certain amount of drug, with doctors' permission, from another country. You would have to sign a release and say that you were under such-and-such a doctor's care. You could order stuff.

SS: So how much did it cost? Do you remember?

RV: It was expensive. I don't remember what it was, but I remember it was expensive.

SS: And the lipids thing. Did you guys make it yourselves?

RV: No, no, no, we got it from some natural herbs place in California.

SS: Some of these drugs turned out to be useless. So what was the feeling at the time?

RV: I think that the feeling at the time was that there wasn't a lot out there. There were very few—if I recall, the only approved drug was AZT. And I certainly wasn't taking AZT because I know that, in the clinical trials, they hadn't done any studies in people of color. And what they found was that African-Americans were more susceptible to anemia taking AZT. Even though I'm Puerto Rican, I have black blood so I was like, "I'm not taking that drug." I was firmly against taking any medication that I would have to take other medications to deal with. It was just sort of counterintuitive to me.

SS: Was there pressure to take AZT?

RV: I think there was pressure for folks to do medication. Certainly the doctors were saying, "You should be taking drugs." I don't think there was any pressure, at least not for me, within ACT UP to take drugs.

SS: Did ACT UP advocate for clinical trials with people of color for AZT?

RV: Not when I was active, although we wanted expanded access for everyone. That was one of the things that we would talk about when we talked about access to drugs—that everyone, including people of color and women, needed to have access and improved access.

SS: I mean, it's a personality issue that you didn't take medication.

Tape II
00:20:00

RV: Yeah, it was a choice for me. I also wasn't sure about the medications. I didn't think that the medications were necessarily going to be great. And I saw folks doing, for example, my lover was on the chemo for KS and he was just absolutely miserable. And we don't know how effective that chemo actually was. His KS continued to increase, despite the fact that he was on chemotherapy. What he did benefit from was smoking pot, which I got him to do to sort of mitigate the effects of the chemo. So I wasn't that—I understood that it was good to increase access and that if we pushed we might see other drugs in the future that people might access, that people could actually benefit from. But at that, I certainly wasn't going to take AZT.

SS: So you went from this person who worked on the Gay Switchboard, and that's it, to this person who was spending their entire life in this community, having sex with, arguing with, working with. How did that change your life? What was the impact?

RV: Part of the attraction for me in going to ACT UP was that what I saw in ACT UP was the opportunity for social change. What I saw was that we might be able to, using AIDS as sort of a nexus of all of these problems that happened in society, that we could actually address some of this stuff and work toward changing society that way.

SS: Like what, for example?

RV: Like looking at issues of racism, looking at issues of class, access, issues of sexism. So I was thinking that this might be a way to address all of this stuff. That was very idealistic of me.

SS: But tell me what your fantasy was.

RV: Well, that was it, it was—

SS: But concretely.

RV: It was this sort of sixties, “We can change the world. This is a lever for us to move things possibly by talking about the injustice of, for example, the healthcare system and how some people have access to healthcare and some people don’t have access because of socioeconomic issues that people encounter, and because we live in a capitalist society. Big pharm is bad.”

SS: So did you think that AIDS was going to force a change in healthcare?

RV: I actually did. I actually did think that AIDS was going to force a change in healthcare, in access for people—access, especially. I thought that people could get more information about their health, more information about medication, access to medication.

SS: And did it?

RV: I think it did. I think ultimately it did.

SS: In what ways?

RV: I think that we got—in terms of access, now, the expanded access in clinical trials helped. I mean, I sat in on the ACTG, the AIDS Clinical Trial Groups, years later.

SS: What was it?

RV: Okay, these are all the acronyms. The CCG, which was the Community Constituency Group, were the community members that sat on the ACTG, which was the AIDS Clinical Trials Group, which were all of the groups of researchers in the trials that were doing research into drugs. So we were the community members that reviewed all of this information.

SS: This was run by the companies?

RV: No, this was run by the government. This was part of the—this is the next acronym—this was part of the NIAID, the National Institute of Allergies and Infections Diseases, which is part of the NIH, which is the National Institutes of Health. So these were the government trials of drugs, and we sat—and this is what ACT UP did. ACT UP got community members to sit and start to review the information along with the researchers.

SS: So what trial were you involved with on that?

RV: Well, we sat with different groups. When I was there, I sat on the Pharmacology Group, so I sat with a bunch of pharmacists, which was sort of fascinating and very bizarre, because I don't have a—science is the sort of thing that would put me to sleep. For me, what happened was that I always was an advocate. I would always be advocating, saying, "Yeah, we need this. We need this." I would open my big mouth too much and someone said, "Okay, you need to come in here." So I would go in going, "Oh shit. This is not necessarily what I wanted. I want other people to go in there, not me." So I ended up in that position.

Then what happened was—because I tend to be the type of person that likes to organize and get stuff running for folks around me—I moved from sitting on the Pharmacology Committee to being what was called the "point person" for the ACTG, which was the person that interacted the most with the government to organize it. So I organized then, for example, trainings of the community members that became part of the CCG. Because they would go recruit folks and not necessarily tell them or teach anything about what they might necessarily be doing. Sometimes it was a lot of advocates who got pushed in there, who were like, "Okay, we need to do this." They

would say, “Okay, come do this.” But then people were sitting there not knowing any of the science, for example.

Tape II
00:25:00

SS: Okay, I’m a little confused, so we have to back up a little bit. Who was the government—what is a name of a government point person?

RV: Ultimately, Tony Fauci was head of the NIAID.

SS: And who appointed him?

RV: Tony was—who did appoint Tony?

SS: Was he a presidential appointee?

RV: I don’t know if he is a presidential appointee, actually. He may very well be. I don’t remember how—you’re going to have to talk to the TAG boys about stuff.

SS: So let’s set up the first time that you meet him. How did that go?

RV: Tony?

SS: Tony Fauci.

RV: Tony calls me Bob, which really irritates me. I met him, I guess, at the first introductory meeting.

SS: And that was in Washington?

RV: Yeah.

SS: And who paid for you to go there?

RV: They did.

SS: They put you up in a hotel and everything?

RV: Let me see if I can remember this. I went from the Health Group to working at the Minority Task Force on AIDS. I went from managing the Health Group, to sort of being the office manager and that kind of stuff, to becoming an outreach worker at the

Minority Task Force on AIDS. So when I was there, as an outreach worker, one of the things I saw was that the Task Force really didn't talk to people about treatment at all.

SS: It was prevention-oriented.

RV: It was prevention. And even the prevention was sort of the lame-ass prevention that people still do, which is to sort of run around and give people condoms and that's about it. So when I was there, I said, "We need to start doing more stuff about treatment and talking to people about treatment." Because the Task Force did prevention, but it also did client services and we did housing services. So we were also serving people with AIDS, because we ran transitional housing. But they weren't doing any treatment stuff at all. So I said, "Wait, we need to do treatment stuff. We need to be educating people about the treatment stuff." And what I was seeing was that in communities of color there wasn't any interest in really learning about the science stuff. People were very much intimidated by the science stuff. And I still am intimidated by the science stuff. All the science stuff that I learned sitting on the ACTG now, I don't remember any of it. It was sort of short-term memory stuff. Science is not my strong point.

But what I saw was that in communities of color, there wasn't a lot of treatment education at all. And there were very few people that were doing treatment education. Moises Agosto was one of the first Latinos that I knew that was doing treatment education. So for me, I saw this situation and I said, "Wait, we need to do this." So I started to pull information together to talk about treatment at the Task Force. Then I got invited because I was one of the few people of color in New York who was actually talking about treatment stuff.

SS: To sit on—

RV: To sit on the ACTG.

SS: Now how did ACTG get started, that system?

RV: I don't know. I don't remember.

SS: Who called you and said, "Come, be on this."

RV: Moises.

SS: Okay, so Moises called you and said, "We want you to come to Washington and be part of this."

RV: Right.

SS: So you went to Washington, and you walked in the first day and who was there?

RV: Let's see, who was there? Brenda Lein, from Project Inform was there. Folks from the—I remember this was the first time I interacted with folks from, I forgot what name of the hemophilia organization was. There were hemophiliacs sitting on the ACTG as well, because they were a community that was very much affected as well.

SS: And was this the stated purpose?

RV: We were there as community members to sort of share our wisdom and give a sort of community perspective about what was happening with the clinical trials, to affect the way the trials were being designed, the way that trials were being run.

SS: So do you remember the specific things that you said or found when you looked at those trials, that you told the government?

RV: Well, yeah. We would talk like, if you were recruiting people for a clinical trial and you are going into, let's say, low-income neighborhoods, it makes sense to have

people who are members of that community to function as your recruiters, for example. It would make sense if you were going into a Latino community that you translate all of the information into Spanish and consequently make sure that the people who work there speak Spanish—just speak Spanish. You can say they can be Latino, if you want, but just speak Spanish. So it was that kind of issues about cultural appropriateness or cultural sensitivity that were part of the things that we were talking about.

SS: And how were those suggestions received?

RV: Sometimes they were received really well. Some of the researchers were cool about it and understood it, some were not. What we were also doing was broaching the nice, antiseptic world of research, and saying that you had to come down to the messy community level in order to engage in research. And this really pissed some of the researchers off and they felt very—

SS: How was that expressed?

RV: I referred to some of the them as “Stepford Wives,” because it was almost as if they weren’t used to interacting with other human beings. So they were talking in formulas. It was like, “No, no, no, you cannot talk to me in a formula.” I remember having a conversation with someone like that: “No, no, no, you need to talk to me in English. I did not go to medical school. I am not a physicist, alright? So you need to talk to me. I don’t need to learn your language, you need to learn my language.” So I remember doing stuff like that. And that was part of what we were doing at the CCG.

SS: And how would they respond?

RV: Some of them responded fine. Some of them were cool about it. Some of them were real dicks and would just say, “You’re corrupting the research. This is not going to work. This is going to screw up the model that we have.”

SS: What would corrupt the research?

RV: The fact that you were interacting with the community. We were saying that the community needed to be part of the whole research process, including when you sat down to pose a research question. You might find it an interesting intellectual question, but given that we’re talking about an epidemic here, is it actually useful to spend money to find this out? There were some research questions where the discussions were at the level of how many angels dance on the head of a pin. Who the fuck cares about that? We were talking about people who were dying. We were talking about people who did not have access to drugs. We were looking for medication and drugs. These are the discussions that we should be having—not only what those drugs are, but how are those drugs affecting people? Because one of the things that we saw was that the researchers functioned using this white male medical model. That was the model. So we were saying, “How do these drugs work in women?” It was almost like women were considered alien beings from another planet that suddenly sort of dropped here. So I remember having those arguments about, “How do they work in women’s bodies?” “We don’t know.” “Well, why don’t we find out? How do they work in the bodies of people of color? Some of us are physically different, so why aren’t we looking at that?” So those are some of the issues that came up in the research.

SS: Among the ACT UP people or the community people who were on these committees, did you guys ever fight with each other or did you have a united front?

RV: Well, we had a united front in front of the researchers, of course. But sure, there were always different factions.

SS: Do you remember a specific—

RV: I remember that when I went into the CCG there was this whole thing about people who were much more supportive of the scientists and people who were much more community-based. So among the community people, there were people who were much more supportive of the scientists and—

SS: Like who?

RV: I remember there was an argument with this guy, Juan Ledesma, who was from L.A., who was a Mexican treatment advocate from L.A.

SS: How do you spell his name?

RV: L-E-D-E-S-M-A. I remember him arguing with Moises, actually. Of course there were all these different factions and groups. There were the people of color who were really engaging a lot with the gay white men who were there, and there were people of color who were not. So there was always a suspicion between those two groups, for example, of people of color, where it was like, “If you get along with the white boys, then that’s problematic.”

SS: Was that between straight people of color and gay people?

RV: No, actually. Did it play out that way? I’m trying to think. I think sometimes it did.

SS: Do you remember who the people were on either side of things?

RV: I remember the argument between Moises and Juan, and I remember hearing it.

Tape II
00:35:00

SS: And Juan was not gay.

RV: No, Juan was a gay Latino man, living in L.A., living with AIDS and who was a treatment advocate. So he got along with—and I forgot who it was. You're on the CCG for a certain amount of time, so when I went it was sort of a bunch of new people and some people were phasing out. So I think that part of the argument was leaving. But of course, you still have to hear the *mishegas* when you walk in. So I remember hearing about Juan and how he was getting along with the gay white men. And there were a lot of other people of color who were not getting along with the gay white men. So because Juan was, the other people of color were suspicious of Juan.

SS: And were you getting along with the gay white men?

RV: I tried to get along with everyone until I found a reason not to get along with them. I went in not necessarily—I sort of let my enemies reveal themselves.

SS: Who were your enemies?

RV: There wasn't anyone on the CCG that I had difficulty with. There was one guy who was—I don't remember what his name was—who was the point person, who was really, really controlling and didn't want to do any kind of education for CCG members. I remember having a discussion with him about that and having an argument with him about that: "No, we have to educate ourselves. What's the point of bringing people on who don't understand any of this and are not going to be able to advocate in a way that's really effective?"

SS: Do you feel that your level of education was enough to be able to fully advocate, or do you feel that there was some kind of manipulation of the community people?

RV: I never felt confident with my knowledge of science. I understood it. I could understand some of the concepts. I remember sitting at TAG meetings. I remember going to TAG meetings for a while, and then I went, “Sorry, this is not for me.”

SS: Why?

RV: Because folks were talking science in a way that sounded to me like researchers. They had an understanding and a very sort of in-depth knowledge of the scientific concepts and what was happening in a way that I did not. I was a much more sort of on-the-ground community person. So I didn’t do that. And I had no desire to be. Some of the TAG boys—let them be researchers because that’s what they obviously want to be. It’s like, “I’m sorry that you got a degree in, you know, art. Who knew? You should have gone into medicine.” So there were some folks who were very comfortable in learning all that and knew all that stuff. There were other people who were not. And unfortunately, there was always a disconnect because what happened with TAG—and now I am sort of getting tangential here—one of the things that happened with TAG was that for a long time a lot of us didn’t feel that information was actually moving anywhere. They were having the conversations with the researchers. They certainly were understanding with the researchers and the researchers understood them. The rest of us didn’t know what the fuck was happening. It was like, “Wait a minute, you need to be able to talk to us about this as well, because actually the reason why you’re there is to make sure the information goes to everyone.”

SS: Did they agree with that?

RV: Yeah, some of them did. They certainly learned it eventually.

SS: Do you think that their access to this information and their ability to interact with researchers affected their own treatment choices?

RV: Oh, certainly. I mean, a lot of the heavy duty treatment activists are the people who are now looking for the new drugs because they go on every drug. They've had access to every drug. They are able to talk to all of the top researchers, so they know what's out there.

SS: So do you think they have better care?

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RV: I think they have more access to information. I don't know if they have better care. I don't know if having access to all of the new drugs is necessarily better care, because what they end up doing is being resistant. For example, I feel fortunate that I started treatment in 1995. The whole collection of treatments out there is open to me because I didn't do anything until 1995, whereas good friends of mine are looking to see what the next new thing is because they are resistant to every other drug in the book now.

SS: Are you currently taking any medications?

RV: I am. I got really sick in 1995. I got what the docs call an idiopathic, which means that they have no idea what the fuck it was. I had fevers of 105 and lost a ton of weight. I was not on medication at that time. Then, after I got through that, I decided that I might as well start taking medication, that this was probably a good time to start.

SS: Are there any meds that you are taking that were made available directly because of ACT UP?

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RV: You know, I'm not sure. I would say yes. I am not going to say any specific drug, but I think the whole treatment advocacy and treatment activism that came out of ACT UP is what has presented itself as all of the drugs that are available now. So

directly, yes. The activism that we did, the stuff that we did at the FDA definitely resulted in the fact that now there are all of these drugs that are out there that people can access. Unfortunately, we didn't do stuff about cost or anything.

SS: Why not?

RV: Well, how do you change the pharmaceuticals? That is, in some ways, maybe more legislative than anything else. We ended up doing all of this advocacy and all of this activism about access to drugs, and it's great. But the drugs are so fucking expensive that it makes it very difficult for people to access.

SS: Do you think that we could have done more?

RV: I think that we could have done more. I think that a discussion that we didn't engage in in ACT UP was about socioeconomic issues. We didn't talk about class.

SS: Would you say that that was true for everyone in ACT UP?

RV: That we didn't talk about class? Yeah. I think it's true in the United States. People don't want to talk about class here. One of the things that you saw in ACT UP—I was really surprised at how many of the gay men in ACT UP went to college. I didn't go to college. I went to college for one year and became a drug dealer, because my boyfriend was a really bad pot dealer.

SS: But there was a Prison Committee, and an Insurance Committee, and Housing Works.

RV: Yeah, eventually. Absolutely. Housing Works came out of the Housing Committee. So later, definitely it happened. I would say not necessarily in the days that I was really active there. And now they are doing that whole Health Gap: "Let's save the poor, unfortunate Africans," as if people aren't fucking starving in this country.

SS: Well, do you remember any people specifically making a class analysis on the floor of ACT UP?

RV: Well, I remember Maxine sometimes talking about some of the class stuff. I remember Gregg Bordowitz as well talking about some of the class stuff. But Gregg was a red diaper baby, supposedly, as was Avram. So I think that people who understood did a little of that. But I didn't see a lot of that class analysis happening at all.

SS: Well, what was the class dynamic between people from working class or poor backgrounds and then—there was the whole spectrum.

RV: There was absolutely the spectrum. I think that the spectrum—I think it may have played itself out, for example, in the different committees that people joined.

SS: Like how?

RV: I think that the folks that did the treatment—whatever Wave 3 turned into, the Treatment and Data Committee, I think it was. I think all of those boys were all college educated and fairly middle class, who could engage, who could walk into that situation and say—I think one of the interesting things about middle class people is that middle class people can look at a situation and say, “Oh, I can do that. I can understand that.” They may not, but they certainly think they can. Most people that are working class look at something and say, “I don't know that. I can't get that.”

SS: So which committees did the working class people go to?

RV: I think, for example, Majority Action.

SS: How many people were in Majority Action?

RV: In the beginning, I think there were about ten or fifteen people. In the first committee meetings we had, there were about ten or fifteen people.

SS: And did it go up from there?

RV: I think so. But not too long after that—one of the things that I realize, that I've seen now as part of my pattern is that I help to initiate stuff but I don't stay around to make sure that it stays around. But I certainly help to initiate it, to get it up and moving. Then I move onto something else. I remember sitting through the first meetings of the Majority Action Committee and sort of helping in the beginning, but then I became the at-large member and I stopped doing the Majority Action stuff to do that.

SS: Do you think that being gay gave you an access to class, to people of a higher class, than you would have had if you were straight?

RV: Yeah, definitely. It's fascinating. I call the gay bars the great equalizers, because men from different socioeconomic classes are there and speaking a language that is very different.

SS: So did the ACT UP social structure mirror the bar social structure?

RV: Hmm, I don't know. What I'm trying to remember are the folks that I socialized with.

SS: Yeah, who did you hang out with?

RV: Who did I hang out with? I hung out with Debbie Levine. I hung out with David Kirschenbaum. He was my closest friend. I hung out with Gregg when I dated Gregg. Who else did I hang out with? David and I were probably the closest. We had been friends before. We had been very good friends before ACT UP, and then both went into ACT UP. Then he became the treasurer and I became the at-large member and we stayed very close friends. So he was my best connection in terms of people. I remember

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there was this whole circle of people that used to hang out at The Bar, for example. And it was generally, I think, most of the people who lived on the Lower East Side.

SS: Did you live on the Lower East Side?

RV: No, not at that time. I lived on the Upper East Side, because I left the apartment that I was in when I was with Jeff in 1986. We lived on 82nd between Columbus and Amsterdam, and then I moved to 81st Street and York because the landlord wanted me out of that apartment. I told him, "Get me another apartment and I'll move." So I moved to the Upper East Side and I was on the Upper East Side for about two years, which is a real bizarre—

SS: So are you saying then that when it came to working on projects, people would go towards their class and racial group, but when it came to socializing and sex it was more mixed up?

RV: Hmm. Repeat your question.

SS: On one hand you're saying that certain committees attracted people of a certain class, and on the other hand you're saying that socially and sexually it was more mixed up, like the gay social world.

RV: Yeah, I think so. I think it is the way that people engage each other. And I think the way they engage each other is different depending on what the situation is and what the context is. It's also where your comfort level is. So you might feel comfortable fucking a particular type of person, and not necessarily comfortable working with that person.

SS: Is that true for you?

RV: No, actually. It's not true for me. If I can socialize with you I can have sex with you. If I can work with you I can have sex with you, although I try not to anymore.

SS: So let me ask you, did people in ACT UP have safe-sex?

RV: Oh, I don't know. That one I don't know. I think some people did. It's funny, I remember sitting at a meeting years later, in Dallas, a gay men's prevention meeting that was called by what is now GLAMA, the Gay Lesbian Medical Association. Whatever they were before that had a big prevention meeting. One of the first speakers was talking about how—he said, “I know for a fact,” he said to this room of gay men, “that people in this room are not practicing safe-sex.” And people were really quiet. So I think that some people were practicing safer-sex in ACT UP and some people were not.

SS: Do you think that because you can trace your point of infection to before, that you have a different emotional relationship to being infected than people who became infected after all the information was available?

RV: You know, one of the things that I realize is that I've never been negative. I don't know what that means. My consciousness is being HIV-positive, learning that I was positive and then living my life as a positive man for the past twenty years. So for the time before that, that I was actually HIV-negative, there was no HIV-negative. So yeah, for me I think I have a totally different consciousness about it. Even when I was doing prevention work—I've done almost the gamut of HIV work, except case managing stuff because that's just a little too intense for me. But I've done prevention work and I've done treatment advocacy work and all of that. And I remember sitting on prevention committees and doing prevention work, being the HIV-positive man and doing

prevention work. I kept on saying, “In some ways, you can’t go by me. But you can actually, because I was positive before we started knowing what it was.”

SS: So you don’t have to carry the burden of consciously—

RV: Seroconverting? But in all reality, probably I would have. I don’t know if I could ever have stayed negative, realistically.

SS: Why is that?

RV: Because I think that, for me, desire is not a rational process. So I think it’s very difficult to think—I sleep with men for all sorts of reasons, and not necessarily rational or logical ones: “I’m having a good time in this conversation. You’re sort of cute, so we’ll fuck. That’s enough for me. You’re wearing a cool pair of shoes, okay.” So it’s not a rational process for me. So understanding that, I don’t think that I could say, “This is what I need to do. We need to be safe. We need to be safe all the time.”

SS: Well, how did that play out in ACT UP, politically and personally, in terms of the tension between focusing on prevention versus treatment?

RV: I don’t think that there was a lot of—from what I know about ACT UP before I became part of ACT UP, it was about treatment. It was about drugs into bodies. I remember that mantra. So I don’t remember a lot of stuff about prevention at all. So ACT UP was always, for me, about treatment, about people getting access to treatment. It wasn’t necessarily about stopping people from getting infected.

SS: And was there any sort of separation in ACT UP between people who were HIV and people who were not?

RV: I know there were folks in ACT UP who were very publicly HIV-positive. I know that there were folks that were positive who didn’t disclose their status. I think

some years later I found out, “Oh, he was? Really? I didn’t know that.” So I think there were people who were not out about their status in ACT UP. And I think that’s a personal—that’s a hard one, because I think it’s a personal decision for folks. Some people feel comfortable in disclosing. I’ve always disclosed. Most definitely, once I found out in 1987 that I was HIV-positive, I tell my sex partners that I’m HIV-positive, even if it’s a bar. I tell them. And part of the reason I say it is because it was important in the late-1980s and early-1990s to see someone who looked fairly healthy, to say, “I’m a person with AIDS and I’m fairly healthy. So not everyone is dying. You can actually see people out there who are surviving.” So it was very important for me to do that. Years later, I found out that there were a lot of people who were pissed off about my being out about being HIV-positive.

SS: Why?

RV: You know, they thought it was inappropriate. It was bizarre.

SS: In ACT UP or in the world?

RV: Some, yeah. There was some person who was very pissed at me, who I am not going to mention because he’s a journalist.

SS: Oh, I better watch out. I want to ask you, would you tell us what drugs you’re taking now?

RV: Yeah, sure. What am I taking? I’m taking Fortovase, and Epivir, and Ziagen. I am doing what I hated to do, which is I have to take Lipitor for my cholesterol, since my cholesterol has been elevated by the drugs I’m taking. I always love that.

SS: So where do you go for treatment information? How do you decide what to take?

RV: Well, for me now I can either go on line—I know that if I need to talk to people, I can talk to the treatment divas. I know them.

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SS: So like who would you call?

RV: If I have a question about treatment stuff, I can talk to Moises. Moises Agosto and I were roommates. When he first started in ACT UP, we were roommates. So if there is an individual, a community person that I would talk to about treatment information, I can talk to him. He still sits on all these committees, and goes down to DC and does all that treatment stuff. He started the National Minority AIDS Council Treatment Department, the Treatment Advocacy and Treatment Education Department. He started it. So he's a big resource. I still know a lot of people who do treatment stuff. I know Mark.

SS: Harrington.

RV: Harrington. Peter Staley, who has set up a website called "AIDS Meds." So I know treatment people that I can get on the phone with and talk to.

SS: All these people you know from ACT UP.

RV: All these people I know from ACT UP, yeah.

SS: You said that when you were at the Minority Task Force, you guys were doing transitional housing. Now, I'm under the impression that the first housing organization for people with AIDS was Housing Works out of ACT UP. Is that right?

RV: I think they're the first organization that only did housing. I mean, Minority Task Force was doing housing when I started in 1989. I think I started there in 1988 or 1989, and they had housing. They had a house up in Harlem.

SS: Was there coordination with the ACT UP Housing Works and Minority Task Force?

RV: I have no idea. I doubt it.

SS: What was the relationship between the two organizations?

RV: ACT UP was considered a white organization, so people were not necessarily interested in working with ACT UP.

SS: Did you ever use your relationships with ACT UP to bring resources into Minority Task Force?

RV: I think I used some of what I learned in ACT UP to sort of better work in Minority Task Force. I can't say that I could bring resources. ACT UP really didn't have resources to bring to the Task Force. But certainly the knowledge and the information I gained from working at ACT UP I certainly used.

SS: Did you use organizing techniques?

RV: No, it was a service organization. We didn't organize. I mean, I did stuff like treatment education stuff and I learned that from participating in the teach-ins in ACT UP. So I did treatment education stuff for our clients.

SS: Okay, so let's get to the Gran Fury.

RV: Gran Fury. The grandeur and the fury.

SS: How did you get to be part of Gran Fury?

RV: I opened my big mouth, as usual, the way I ended up as a member of TAG. The way I ended up as a member of TAG, I'm in Amsterdam at the AIDS conference. David Barr is up on stage in some session talking about how TAG is accessing all these people. I raised my hand and said, "There are no people of color in fucking TAG, what

are you talking about?" I get a phone call when I get back to the United States from Mark Harrington inviting me to join TAG.

SS: So TAG was invitation only?

RV: It seemed to be at that time, yeah. I thought, "I don't want to be in TAG, but now I have to go into TAG because I opened my big mouth."

SS: Wait, was TAG separate from ACT UP at that time?

RV: I think it was at that point in time. I think it was separate from ACT UP. Treatment and Data had become TAG.

SS: Why did they leave the organization?

RV: I have no idea. You would have to talk to the TAG boys.

SS: So you went to your first meeting. Where was it?

RV: The TAG meeting? At someone's fabulous apartment on Fifth Avenue, I think it was, or off Fifth Avenue.

SS: You don't remember who?

RV: No. But the funniest part is I remember having a conversation with David Gold, who does vaccine work now. I met David Gold who does vaccine work, which we can talk about later on. I said to him, "You know, I'm generally the only person of color sitting in a TAG meeting. I just feel it's so unfriendly." He said, "Robert, it is unfriendly. No one feels comfortable there," which was a wonderful insight for me. It was like, "That's good to know. You're all unhappy. It's not just me."

SS: And why was it so uncomfortable?

RV: I don't know. It was very bizarre. First of all, there were people with a level of knowledge that I didn't have. I don't know the science that well. So people were

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having these discussions, these really, really complex, in-depth discussions about treatments. I was just sort of sitting there like, “Huh? Do I need to know this?” Ultimately, I was like, “You know what? I don’t need to know this. I don’t need to be a researcher.” Which was part of why I left TAG after a while. It was like, “I don’t need to do this, because I’m not getting anything out of this. These conversations are happening in front of me, and these people are having conversations in a language that I don’t understand.” And when I went back to the organization that I worked with, which was working with low-income people of color, I couldn’t even translate what the fuck they were talking about. So it was like, “This is a waste of time for me.”

Gran Fury—ACT UP got approached by Museo Del Barrio to do an installation in El Museo Del Barrio on HIV and AIDS.

SS: Who was the person from the museum, do you remember?

RV: I don’t. I probably have the information somewhere. We did stuff about prevention. We did blow-ups of safer-sex—

SS: Were you already in Gran Fury?

RV: I wasn’t in Gran Fury yet, no. The offer came to the Coordinating Committee or to the Majority Action Committee, possibly. No, no, I got it. Debbie Levine used to work at Creative Time. And Creative Time was helping to organize something at El Museo Del Barrio, and they said, “We can get someone to do something about AIDS in El Museo Del Barrio.” So Debbie came to me and a couple of other people and said, “Let’s do this.” So that’s how we did it. So you’re right, I will actually remember all of this after you’re gone.

SS: And were you a working artist at that time?

RV: I was a painter. I had a real job, because I made no money being a fine artist. So I was painting, although I wasn't doing that much of it anymore because I had been doing ACT UP work. So that sort of ended that. So Debbie said, "Let's do this." So we did these huge blow-ups of prevention information, how to put on a condom. We got them translated. We did this display that was filled with condoms. The information was in Spanish and English. And there was this corridor in the museum. Everyone else was doing art stuff, and we did this AIDS information installation. There was a conference about art and AIDS that happened somewhere in the Midwest, in Columbus, Ohio, I think. I was invited to go since I did this installation. So I sat on the panel. While I was on the panel, I met Tom Kalin, who was there for Gran Fury.

Tom and I started chatting, and I made one of my comments about: "Oh, Gran Fury. You probably have no people of color in Gran Fury, of course not." So we came back to New York, and of course there's a telephone call: "Robert, why don't you join Gran Fury?" I was like, "I don't know if I want to join Gran Fury." Again it was like, "You opened your mouth, you should learn." I think I've learned it by now. So I went and became a part of Gran Fury. I was in Gran Fury for about three or four years.

SS: So who were the other people in Gran Fury?

RV: There was Tom Kalin, Avram Finkelstein, Richard Elovich, Donald Moffet, Marlene McCarty, Michael Nesline, Mark—what was Mark's last name? I forgot what Mark's last name was. Who else?

SS: And Loring. Which projects did you work on?

RV: A bunch of them. I was one of the few people in Gran Fury that—I was about the education stuff. I enjoyed working on the projects and all that stuff, but I was

the person who didn't mind talking to people. So I ended up doing a lot of the public talking. They would give us money to go do lectures and stuff like that, so I would do stuff like that. I would go off to the art schools to do lectures, getting the two grand for us to do stickers to give out in the ACT UP meeting. I would do that because no one else wanted to do that.

One of the interesting things about Gran Fury was that not all of us were working artists. At that time, I was working in the Minority Task Force on AIDS. Michael Nesline was a nurse. Avram Finkelstein used to be at Vidal Sassoon, and he was doing something like that.

SS: He was a haircutter.

RV: He was a hairburner. Loring did nothing because Loring doesn't have to do anything.

SS: Now you're in the bus.

RV: I am in the bus. I'm kissing Heidi. I'm kissing Maria Maggenti's girlfriend at the time. That was very funny. Heidi Dorow, who is now doing—where is she?

SS: Some kind of homeless—

RV: Yeah, the Homeless Coalition.

SS: So tell us about this “Kissing Doesn't Kill.” What was it?

RV: It was a public art project that was called “Art Across America.” It was a whole bunch of artists doing public art work, and Gran Fury decided that what we wanted to do was a Benetton's ad. We got a whole bunch of people together. We came up with Gran Fury's statement. The piece was three couples kissing. One was an interracial

couple, a man and a woman—me and Heidi. Two men, Mark and Jose Fidelino. And then Julie and Lola.

SS: Julie Tolentino.

RV: Julie Tolentino and Lola Flash. What we did was we shot it in someone's loft. I forgot who's loft. We just invited a shitload of people to come. We got all these clothes. John Lindell was another one of the Gran Fury members. We just invited a whole bunch of our friends and people from ACT UP to show up. We had makeup artists donate their time. We had people show up with clothing to donate their time. So people were done and plopped in front of the camera, and you were supposed to kiss. So what we did was we came up with—and I have actually the book that we sent out too as well. But we did the bus poster.

SS: And who actually shot it?

RV: Tom?

SS: Tom Kalin?

RV: I think Tom shot it. The funniest thing was, all the kissing stuff, we started grabbing combinations of people to kiss. There were moments that were really sort of awkward. There was one moment where I was kissing Tom's boyfriend.

SS: Who was that?

RV: Peter Bowen, who's adorable. It was sort of like, "Oh, this is great. It's not great that Tom is there." I remember Heidi and I were the first couple to kiss. And Maria, her girlfriend and my boyfriend at the time, whose name was Donald, were both standing right outside, right next to us, just watching. Heidi was like, "Doesn't this feel like the high school prom or something, where we have to act like heterosexuals?" It was

really funny. We had a great time. But we invited a whole bunch of people over and then we shot it. We shot it still camera—I don't know what the term is.

We photographed it, but then we also shot it on film because we had been approached by the Red, Hot, and Blue folks that did the first album. What is it called? The Red Hot organization or something, the folks who do the music. They have done a whole series of cd's and donate the proceeds from the sale of the cd's to AIDS organizations. So the first one that they did was Red, Hot, and Blue, which was the music of Cole Porter. They wanted Gran Fury to do something. So we had a film director show up—again totally volunteer—and she shot it. While Tom was photographing it, she was shooting it on film. So we have footage of the couples actually kissing. And we did a short video, like a thirty second video, of the same thing.

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SS: How much did it raise for ACT UP?

RV: I don't think we—well, what we did was, it was a bus poster. It had a tag line. It had the three couples kissing, and it said, "Kissing doesn't kill. Greed and indifference do." Then the whole thing was, "Corporate greed, government indifference,"—and something else. I forgot what it was—"make AIDS a political crisis." I have the text in something here. So that was the whole piece. It went up on busses in New York and Chicago.

SS: Was there any problem getting it on the busses?

RV: Yeah. We had problems in Chicago. It went up, but in Chicago they defaced them. There were all these letters to the editor. No, *The Post* wrote about something else of ours. The funniest thing for me was that in New York it was on busses in the Bronx. It wasn't in busses in Manhattan. And a cousin of mine was one day

crossing the street and this bus went by and she saw my face. She saw my face kissing a girl. She called me and she was like, “Robert, were you in a poster? Were you in a Benetton’s ad?” Which I loved, because everyone thought it was a Benetton’s ad. She was hesitant, like, “You were kissing a girl.” I was like, “Yeah, what you do for art.”

SS: For the cause.

RV: Exactly.

SS: So who paid for it to go up on the busses?

RV: Public Art Fund. If you ask me the question later, then I will remember. It was part of their Art Across America.

SS: So how was your experience in Gran Fury?

RV: It was varied. I mean, I liked it. I liked working in Gran Fury. I liked being able to produce the work that we did. Most of our work was public art work, so we did posters, we did billboards, we did bus signage. So we did a lot of stuff that was out in the street for people to engage. That was great. Everyone in Gran Fury was fun. It was fun working with all the people. It was a different experience. It was a new experience for me to be working with a bunch of creative—my history was coming from being a painter. I had never worked in a collective, in a collaborative process with other people in terms of artwork. So in Gran Fury, we would sit down and bring ideas to the table and say yes, no, reject them, change them. That was something totally new for me. I had never had that experience for someone to say, “No, we’re not going to do it that way. We’re going to do it this way.” Fuck you. We’re going to do it the way that I want to do it. But that’s not the way we functioned. So it was much more of a collective process. But it was good, it was fun.

For me, the frustration started when—Gran Fury tread a very fine line. We were sort of in the right place in the right time, in terms of the artwork and in terms of the fact that we could get funding for the projects that we wanted to do. It think later on we may not have, and earlier we would not have. But at that time, nobody was doing any AIDS artwork. So we were very fortunate. But the problem with that was we very quickly became art world celebrities. We got asked to participate in stuff. For a long time, were not interested in doing other stuff. We would say, “We are only doing stuff in New York. This is where we live. These are the communities that we engage. We are not interested in doing stuff that goes across the country or goes to other countries.” Later on, we started getting offers to do stuff in Berlin, stuff in Montreal. We did the Venice Biennale, although the Venice Biennale was very well worth it because we attacked the pope in that one. So that was very much fun.

So I think that it became very—it’s hard to sort of maintain that balance. Working in the art world was very seductive. We would go to openings of our work at the Museum of Contemporary Art and stand there with Jenny Holzer and Barbara Kruger, and here are the folks from Gran Fury. So on some level, it was like, “Whoa, we are art world celebrities.” The fun part for us was that people didn’t—people in ACT UP knew who the members of Gran Fury were, essentially. Or they knew some of the members. So they had faces for Gran Fury, but for a lot of the art world nobody knew who the fuck Gran Fury was. We kept it that way because we didn’t do interviews and we didn’t do photographs. The only names we—we only said Gran Fury.

SS: So for the people in Gran Fury who really were trying to build careers as artists, that must have had a different kind of consequence than people whose only project was Gran Fury.

RV: You know, I think that that was always a tension there. There were those of us who were functioning artists, who were working, who could certainly parley the Gran Fury experience into some kind of art world benefit in some way, really. I don't know. I can't say if people were consciously doing that or not. I remember once we had a discussion about that, where we said, "Are certain people here sort of making their careers based on their work with Gran Fury? Is that good? Is that bad?" I remember that was a really hard discussion. I don't know what—we continued to work together, so I guess we came to some kind of resolution. I don't know if we necessarily answered that question. But certainly, it was an experience that people were able to use. I mean, we had galleries who liked Gran Fury members. So I remember Wessel [+] O'Connor was one that loved Gran Fury, although I don't think we ever did anything for Wessel [+] O'Connor, because we never did anything for galleries. But they did shows. And consequently, Loring, and Donald Moffet, and I don't know who else, had shows in Wessel [+] O'Connor. Whether that was based on the merit of their work as artists—because Wessel [+] O'Connor was doing gay male stuff. So was it based on the merit of their work, or was it part of their connection and the cachet with Gran Fury? Who knows?

SS: So I just want to wrap it up, because you've said a lot of things.

JW: Four minutes for this tape.

SS: Okay. Here you are. You're still working with Moises. You're still working in community-based stuff. The relationships that you forged in ACT UP, those are still with you.

RV: Some of them are, yeah.

SS: What do you see as ACT UP's achievement, ultimately?

RV: I think that ACT UP's achievement was—was, I don't know if it still is—was the ability to mobilize a group of people with a very clear intention. And as time passed, different groups of people with a similar intention came into the group and started doing stuff. I remember, for example, there were so many IV drug users who came later on into ACT UP, who learned about organizing through ACT UP and then went on to become activists themselves. So I think sort of the legacy of ACT UP, or the great feat of ACT UP, was the ability to bring all of these people together and imbue these people with knowledge, empower them if you want to use that word. And then these folks went out to do other work. So I think that was certainly—I think that ACT UP, historically, directly came from, for example, the women's health movement of the 1960s. A shitload of what we did in ACT UP came from that. Even the same language came from that. I think that we're part of a history. And now when you look at activists for other diseases, for example, they use ACT UP as a model.

SS: Would you say that ACT UP was successful?

RV: I guess the question is, "In doing what?" Did we get drugs into bodies? Yeah. At that level, yeah. Did we address some of the socioeconomic class stuff that happens around HIV and AIDS? I don't know if we did. Partially we did. We have organizations like Housing Works that came out of it. Did we address the issues of

women with AIDS? I don't know about that. Some. A little. So I think that the success depends on what you're looking at. Some of it we were very successful at. Some of it we didn't do such a good job.

But I think it's necessary. And given the situation now, the political climate now, which is much more fucked up than in the beginning of ACT UP, now is when we actually need to start doing that. I've had a conversation with a bunch of people who have said, "It's time for us to go back, because we really need to do work now."

SS: Do you think it'll happen?

RV: That I'll go back? I don't know. I may. I'm thinking about it. I think it's really necessary. But I think that the situation has changed drastically, and the kind of activism that we did in ACT UP before—we need to become much more sophisticated about it now. For example, people can get jailed now for stuff in a way that they could not get jailed before. We talked about all that stuff. So I think for me, maybe I might go back. It's necessary.

Tape III
00:40:00

SS: I bet you will.

RV: I want to balance it, though.

SS: Do you feel like there's anything you want to—do you want to sit with it and see if something jumps into your head?

RV: You mean something that I remember from—no.

SS: Some chunk of some subject matter that we haven't covered.

RV: You'll hear it on the bus, or downstairs, and suddenly I'll go, "Oh no, it was called—." No, I'm okay.

SS: Robert, you did so much.

RV: Yeah, I know. It's scary, isn't it?

SS: I mean, you're such a key person in the history of this. It's quite amazing.

RV: The funny part is, I just sort of do this stuff and I don't keep track of what it is that I'm doing.

SS: So you took this from here, and you brought it here, and you brought this there.

RV: Yeah, I know. It's weird.

SS: It's great. It's really something to be proud of it.

RV: My mother's just grateful I'm not getting arrested anymore.

SS: She doesn't know.