

A C T U P
ORAL HISTORY
P R O J E C T

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Interviewee: **Elias Guerrero**

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ACT UP ORAL HISTORY PROJECT

Elias Guerrero Interview

March 17, 2004

SARAH SCHULMAN: If you could start by saying your name, how old you are, today's date, and where we are?

ELIAS GUERRERO: My full name is Elias J. Guerrero, Jr. I am 52 years old, and today's date is March 17th, 2004. We are in my apartment, 44 East 12th Street, 3C, in what's called I think, the Central Village.

SS: Where were you born?

EG: Actually, I was born on a Naval Air station in Corpus Christi, Texas. I think my father was still finishing up a tour of service, and my mother – I think she might have just gotten out of the Navy, and she went into premature labor. I was actually a premie. I weighed four pounds, four ounces, and from what I was told, I lived in a shoebox after I left the incubator, for a couple of months.

SS: Were they career military people?

EG: No. My parents – I would describe them as career civil servants. My father worked for the Department of Agriculture as a soil conservationist, and my mom was a high school physical education teacher before mid-career change in '60s, where she became a Head Start Director. So, she managed a Head Start program for four counties in South Texas. We come from a public sector background.

SS: And, were they both born in Texas, as well?

EG: Yes, they were both born in Texas. My parents – I would describe them as being shaped very much – like I was – by the events of their day, which for them was World War II. My mother was a WAVE in the Navy, and worked in naval research in Washington, D.C. – that's where she was stationed. And my father flew reconnaissance in a Piper Cub, in Europe. He was in sort of – I think he was a junior when the war broke

out or something. So, he left college and maybe came back, or maybe he finished – I don't remember. But, my mother studied under the G.I. Bill, and she got her degree. So, we were raised with the consciousness that we were expected to move beyond just going to high school. We knew that we had to go to college, because that was what was expected in my father's family. My mother's family – she was the only one that was able to complete college. So, their world experiences really informed them. So, when the civil rights era came about – the war on poverty – their consciousness had already been formed by what they had seen, and most importantly I think, what they came back to, because that part of Texas was still very segregated. There were a lot of Mexican Americans. That was the majority of the population down there, but it was still segregated, in many ways.

Tape I
00:05:00

SS: What kind of neighborhood did you grow up in?

EG: Actually, it was a typical neighborhood. A lot of the owners in that little neighborhood were World War II vets. What was unusual for us is that the streets were paved. They were curbed.

SS: This is in Corpus Christi?

EG: No, this is in South Texas. My father's family was from Rio Grande City, which is a small town in-between Brownsville and Laredo – right on the river. So, we crossed over into Mexico all the time. It was not unusual for us. We did a lot of shopping – just like people nowadays go across to get their medications because they're cheaper, we could buy all sorts of stuff there, and we did.

SS: So, what was the Head Start program that your mother was running?

EG: It was all centered around early childhood development. Since education was a big deal for our family, and many kids that were going through the schools down there couldn't finish school because of poverty – there were a lot of people who to sustain themselves, migrated. So, they would work the fields and harvest the crops in the valley of South Texas. The Rio Grande Valley is a big agricultural area, not just ranching and farming. So, people would harvest crops, and then when the seasons changed, they'd move up North, to the Midwest. Wherever the crops were, that's where those families and their children went. And so, their educations, if they got them, were very fragmented. I think the whole idea was to – if she worked with systems in the schools to get kids' education early on – it would kind of ripple and stay with them a little bit better.

SS: So, as you were becoming a teenager, a lot of the political movements in this country were just exploding. Were they visible to you in South Texas or did you just see them on TV?

EG: Well no, I would see them on TV, and I remember watching the demonstrations. I think it was in 1968 – the Chicago demonstration. Of course, when television – that was my only connection to the outside world. My father's sister was a librarian, and for the longest time they used to get the *New York Times* on Sunday. It would come a week later, but I would just devour the magazine and the newspaper, because I knew – I just knew – that there was a whole world out there. And there was more to the United States and the world than just what was happening in South Texas. One thing that happened when I was in high school, there was a – Caesar Chavez, and that whole struggle, moved to a part of South Texas and there were marches and strikes and stuff. And I remember, because our next-door neighbor was a district attorney, them

siding with the landowners and the farmers. And they used the Texas Rangers to break the strike. So, the [United] Farm Workers never really took hold like they could have, because the existing political and power structure didn't want that to happen. But you know, I remember being very offended that these gringo Texas Rangers were coming into our community and basically threatening and bullying people. And I thought, well, they're coming in here with guns, why don't we go out and get guns? The Black Panthers were doing it. Of course, when you're a kid – I didn't do anything, but –

SS: Did you ever see any of their demonstrations?

EG: I might have, but I don't remember, it was a long – I remember seeing them on television. They'd show them marching in different parts of South Texas, and I knew there was a big scandal, because the high school principal – of course, we lived in a small town – the 1970 census for the whole county was only seventeen thousand people. The town itself was seven thousand people. So, the high school principal's daughter – who had already graduated from high school, and got involved – she married someone, and I think he was a doctor, and they came and they actually participated in the march, and that was like a bourgie thing – we don't do things like that. I remember hearing comments from my father's aunts like, whatever you do, don't bring any bad publicity, or anything bad to the family name. And I thought, oh God, how corny. Who thinks like this anymore?

SS: What about the war? Did you know people who were drafted?

EG: No. I remember writing some stupid little thing when I was a sophomore, equating Communism with an octopus with tentacles. By the time I was a senior in high school, my attitudes had completely changed. But, I remember getting a number. In fact,

I may still have it, but I was in the 200s, and then I went off to college. I know I got involved with the McGovern campaign. I went to a very conservative college.

SS: Was it a religious school?

EG: No. Actually, I knew I wanted to become a physician, and the whole idea was, if you go to the University of Texas, which is where I wanted to go – actually, I wanted to go to Oberlin or Antioch or Berkeley. Those were my first three choices. And my parents said, “If you want to be a doctor, you’re going to have to do pre-med. You can’t do pre-med and be running around with all of these people and doing all these demonstrations.” And, I was very involved with reading everything I could about the SDS and they said, “No. You’re going to go to school here.” And of course, I did, and I was basically nose to the grindstone, because there were people who came from very good schools in Texas who sort of, like – they just studied an hour before the exam, where I had to, like, cram. But, I made it. I went through, and I was exposed to some of the Ivy League schools through a summer program at Harvard, for summer school students, and I actually transferred to Brown for my junior year, thinking, oh good, I’ll get out of Texas, finally. But the scholarship money that I was hoping would come by didn’t, and so I knew I had a sister and four brothers behind me and I thought, no, I can’t do that. In medical school – who knows where I’m going to end up? And, I actually ended up staying in Texas because Baylor Medical School, where I attended, actually felt more to me like a private school – although a lot of students were from Texas, a good majority of them had been educated outside the state. And so, they brought all those attitudes and experiences with them. So, I felt very comfortable there.

SS: What kind of messages did you get about homosexuality when you were growing up?

EG: That it was something you didn't talk about, that it was bad. I remember – my mom passed away in 2001, and I was, as a co-executor – I had to go through the house to kind of clean up stuff and pull things out, and I actually found a brochure. Because in Catholic Church on Sundays, they give out the schedule, and they give out something about the sermon. And there was an article there about homosexuality. And, I thought, hmm, what's this doing in here? I know I wouldn't have saved that. And, I didn't come to terms with my own orientation until – I would say – probably my senior year in college. And, it really wasn't until my second year – it might have been my second year in medical school that I started really to come out.

SS: What did that mean, exactly?

EG: Well, what it meant for me was, I acknowledged that I was gay. I hadn't sorted out – it still – every now and then, there are issues that pop up that I haven't quite sort of worked through, but back then – and I knew other, who I suspected, gay men in our community – but they'd led very closeted lives. Everybody knew, but nobody said anything.

SS: In those days, was there a morality issue about being able to practice medicine? Was that in any way –?

EG: Well, physicians – again, to me it's a very bourgeois way of thinking – that physicians were the pillars of the community. They were expected to comport themselves in a certain way, and it meant having a family and children, and belonging to the right clubs. I always knew that I was going to be a black sheep no matter where I

went, because my thinking always seemed to move beyond whatever the norm was in my community. I always considered myself, really, probably a frustrated artist, because I feel most comfortable around people who are creative. Anybody who – or, groups of people that write, or produce art, fine art – anything creative, I feel totally comfortable with. But sort of the more, methodical, straight-laced – anything inside the box is uncomfortable for me. And, I really suspect it had a lot to do with my sort of, Native background. I know we have Native in our family. It's much stronger on my mother's side, but it's also the side of the family that is very hyper-religious. And nobody ever wanted to talk about my great grandmother and her Native roots, even though it was – you could see a picture of her, and you could see that she was definitely a Native.

SS: So, when you started living as a gay man, where did that take place?

What kind of community did you –?

EG: It took place – I think I really sort of came out most when I was in medical school. By the time I was a junior – for one thing, I didn't have to study quite as much. There was the opportunity while I was doing my rotations to have a little bit more time off, and that's when I really started to explore my sexuality and date people – go around and try to meet people which wasn't that easy. It's still not easy.

SS: Did you have any kind of gay community at all? Even if it was around a certain bar or a certain –

EG: Well, I used to like to dance a lot back then, and there was a place in Houston called – it was an old bank, and it was called The Depository, and I still remember music from that period. There's one singer that – in fact, I was just thinking about her last night – Candi Staton, "Young Hearts Run Free." I love – every time I hear

that song, I go back to that period. But I was working so hard. And, once you finish medical school, you go straight into internship and residency. And at that time, I was on call every third night for a whole year. So, I didn't have any energy to –

SS: What hospital did you go to?

EG: I started training originally as a pediatrician. So, I did my training at Texas Children's Hospital, and I maintained some of my friends that I had made through medical school. In fact, one of my best friends – and still, one of my best friends – is a gay man who's practicing in Houston, who is actually from New York. And, Stuart and his family became very close to my family. So, those ties have remained. But, it was just exploring in Houston – maybe traveling occasionally to New Orleans – we have friends in New Orleans. I used to tell people, New Orleans had more sin packed in those few blocks of the French Quarter than the whole rest of the United States. But that was okay, for me.

SS: So, did you stay in Texas after your training was over?

EG: I finished my training, and I had decided that I really wanted to go live – and I had been fantasizing about living in the Southwest for years. So, my plan was to move to New Mexico after training. But, I realized at some point that doing straight pediatrics in rural New Mexico was like – the financial impact and rewards, and based on the amount of work that I was going to be doing – I said, this is going to be a tough life. I think I need to go get some experience learning about adults. So, I did a residency and moved to South Carolina – did a residency in family medicine. And, when I finished there a couple of years later, I came to New York – totally on a lark. There was a project sponsored by the United States Public Health Service called the Hispanic and Nutrition

Examination Survey. Every – I don't know how many years, the government sponsors these very large national surveys, where they measure things. And in that period, they were measuring Hispanics. So, I would be in charge of doing the physicals, reviewing some of the lab data. Other people would do the nutrition surveys. Social workers would do other questionnaires. I forget what exactly, it was a long time ago. But in that time, it was finishing up in New York, and they needed a doctor. So I said, well, I'll come here for six months, and I completely fell in love with the city. I said, oh my God, this is perfect. If I can't live abroad, what's the next best thing? So, I'll stay here.

SS: What year was that?

EG: I got here in 1984. So, I've been here for 20 years.

SS: Okay, so you came in '84, and of course the AIDS crisis had begun a few years earlier. How did you first become aware of AIDS?

EG: Through friends of mine who'd gotten sick in Texas. In fact, when I moved to South Carolina in 1982, I had just started actively using condoms for myself, and encouraging my partners to do the same thing. I didn't know a whole lot, because again, I trained in pediatrics. There was – I had a patient, or somebody else might have had a patient in our family practice service, who I'm sure now was HIV-positive. And I had friends who were HIV-positive, back in Texas. In fact, one of them passed away while I was finishing up my residency in South Carolina. But, we knew – I knew the circles that this guy ran around in, and it was a very fast and loose crowd. And it was not anything that I – they had a very successful business, they had a lot of money. And I used to joke around years later, with friends of mine who were Buddhists, and I would

tell them, I want three things. One was more money, more brains, and to be taller. And I realized at some point, that if I'd have any one of those combinations, I wouldn't be here.

SS: What was the correlation between having AIDS and having money?

EG: Just that you could play more. You know – it's like you have the freedom. If you had a business that was successful, and didn't require your time to be there, you could just hop on a plane, and that's what these guys did. And they went and had a great old time. That was how I made that connection.

SS: Your friend who died – what was his name?

EG: Jeff.

SS: What kind of experience did he have? How was he treated?

EG: I don't know. He wasn't a real, real close friend. Actually, one of my best friends at the time who did subsequently pass away – and I think this was – I'm not sure when this was. This might have been after 1984. He was a chemical engineer, worked for Dow Chemical. And, I had met them at The Depository. And, at some point – I forget where Richard – no, Frank started having fevers. At the same time, he developed lymphadenopathy. So, what I did is – and I was doing a rotation in internal medicine, and my attending was a hematology/oncology doctor. So, I had him – I made an appointment for him, and they saw him and they did a lymph node biopsy, but they couldn't find anything. All they showed on the pathology report was that there was hyperplasia. Well, now we know – I mean, hyperplasia just means that there's a lot of activity, and that the gland and the cells and everything are bigger. But, any kind of stimulation or inflammation can cause that. But more commonly, it's an infection that does that. So, anyway – I mean, he was treated very well. It was the Methodist Hospital

in Houston. It was a very good hospital. And, he went home and I think that we didn't know for the longest while, but then at some point it started to become clear. And, he went through AZT and everything and he died.

SS: So, when you came here in '84 – after this contract ran out, this study, where were you working next?

EG: I got a job at the William F. Ryan Health Center on the Upper West Side, and it was a great experience – not that I didn't have my challenges, but it was a great experience. I really loved the neighborhood. Because I was Spanish-speaking, I had a lot of patients from Mexico – well not so much Mexico, but South America – Ecuadorians, Peruvians, people from the Dominican Republic. It was a great experience. I had a couple of HIV patients that started trickling through the clinic. I remember two, in particular. Let's just say I facilitated, and hopefully he was able to stay in the country, because he was an illegal, undocumented person, and he brought his papers, and I think we were able to make it so that he could stay, because by then, I knew what was going on with him, and I knew that his chances if he had to go back home would not be very good. So, I hope I was able to do what I was intending to do, which was to facilitate the paperwork so that he could stay. The other person was a woman whose husband passed away. And, she ended up coming down with HIV, and I remember her coming to the clinic lots of times with really high fevers. But, she wasn't so much concerned about that, as with the day-to-day necessities of living. She had no benefits, and at the time the system wasn't ramped up for benefits. So, I would tell her – I don't know how you're going to do it. We had a social worker who basically had to kind of service the whole Ryan Clinic. And I said look, I know this organization called GMHC – we somehow

have got to get her in there, and get them to kind of recognize what's going on and to help her. And so, I think through a lot of pushing and pulling, we were able to help her get some of her benefits together, but it wasn't easy.

SS: So, you guys looked to GMHC to help your patient base, not to the city, necessarily?

EG: Yeah.

SS: Were you out at the time, when you were working at the clinic?

EG: People knew. I never wore a pink dress to work, but I think it was pretty much understood.

SS: Could you just talk a little bit about Latino patients with HIV in the early days with the epidemic? What the perceptions were, how people felt about their situation?

EG: I think that the overriding emotional tone that I picked up was shame. When people were able to work through that – and some didn't, many didn't, actually – what emerged after that was anger – anger at their partner, anger at something. I think those were the – that is what I remember the most.

SS: Did you feel that patients honestly self-reported about having had homosexual sex or using needles, when you worked with them?

EG: I think so. I think it helped – for one thing, I spoke Spanish, and one of the terms that's very much in use right now is “cultural competence” – but that's a relatively new term. I felt culturally competent with my Spanish-speaking patients. On the other hand, there were nuances that I didn't always pick up. I grew up speaking – it's funny, because I had to learn Spanish. It was like a crash course. I knew Spanish when I

was growing up, but, I went to parochial school and a majority of our teachers were Irish nuns from Boston, and we were forbidden to speak Spanish. If you wrote with your left hand, you had your hand tied behind the desk. There were some real Neanderthal approaches to education back then, and I'm not sure if that goes on anymore, but it certainly did back then. So I had to learn Spanish and really try to communicate with people, and my Spanish was very sort of, simple South Texan Spanish, and these were people who were – like, I remember one gentleman was a janitor at some building on the Upper West Side, but yet he was an engineer from Chile, and left Chile because of the overthrow of the Allende government. And I remember that happening when I was in college. I was really, really upset, because of course I knew the United States government was behind the overthrow of Allende, as was the international corporation IT&T. I would run across individuals like this. I remember another person I treated, I did not speak her language – she was Cambodian. She and her family had been victims of the Khmer Rouge, and she was being taken care of by a family on the Upper West Side, and all she would do, basically, is just come and cry in my office, and try and tell me stories. And I was at wit's end, because I knew this woman needed really big-time psychiatric help, and I was just a primary care physician – what could I do? I couldn't even speak her language. I couldn't get a translator.

SS: What kinds of supports was there for Latino patients with AIDS at that time?

EG: I think that probably more than anything, it was whatever they could scrape up from their social networks. If they were lucky to have a family that still cared. This really brings back a memory – that woman that I was speaking to you about, that we

had sent to GMHC – her son knew. And he totally ostracized her. He basically told her he didn't want to have anything to do with her.

SS: Because she had AIDS?

EG: Yeah, because she had AIDS. He was in high school and I was totally shocked. I just couldn't imagine a child turning his back on his mother. I just put myself in his place and imagine my mother getting sick with HIV and thinking – I couldn't do that, how come he can do that?

SS: Was there a difference in people's experiences between the Latino patients who were gay and the ones who had been IV drug users, in terms of what kind of support they had?

EG: Yeah, the IDUs were sort of seen as different. It was bad enough that you had HIV and you were gay. Or, if you were Latino and gay and HIV and effeminate. But an IDU – they were a whole different class, and it took me a long time to kind of get – and work through my own stuff, because I never had any experience with injection or drug use, for that matter, until I got to New York. So, it was actually through – there was a lot of consciousness-raising that ACT UP did for me – personally and professionally, that I will always be grateful for. But the IDUs, I remember, really had a hard time. But yet, some of the IDU Latinos who were in ACT UP became some of my closest friends, and I resonated with them. Somehow the way they thought, and how they experienced and saw the world was the way I had seen it, even though, I never had any of the same experiences that they did.

SS: Let's talk about how you got to ACT UP. How did you get to ACT UP?

EG: I'm not sure what year – I'd go to the Gay Pride marches and stuff, and I stand by the sidelines and see ACT UP, and thought, wow, look at this group – they're doing stuff about AIDS – great, great, great. I was always struck by the energy. I remember one year, I witnessed the parade and the number of people in the ACT UP contingent stretched one whole block, and I thought, wow, this is something. I had seen some of the demonstrations. What was also going on around this time – when did ACT UP first start?

SS: '87.

EG: In '87, I was involved in a relationship that kind of went south, and that's when I jumped in – I had sort of an existential crisis, and I used – there's no mystery here – religion. In this case, it was Buddhism, and I got very involved in the Buddhist community in Westchester. And that became my community, and that's what I did on the weekends. We went on retreats, whatever. But at the same time, all the ACT UP stuff started to happen. And of course, I was still practicing. And, I don't know what year – it could have been '88, it could have been '89 – around the holidays, I was reading a book – the biography of Lorca. And it's like, the earth shook for me when I read the last chapter or two – the scene where he's taken to the graveyard behind the church, where he's shot. And I realized, oh, my God, bullets are crude. We don't need to use fucking bullets. We can use viruses and do the same thing. So, either by intention or by neglect, I equated the same forces that destroyed Lorca, were the same forces that play in the AIDS crisis. And like I said, for me nothing was the same after that. And, this friend of mine, who I was visiting in Park Slope – he's a lawyer, Jesuit trained and very liberal, said, "You've got to join ACT UP." So, I went to a meeting, and I said, yes, this is where

I need to be. And it was around that time that the Stop the Church action – I think that was December of 1989. The reason why I didn't make that action was because my father had passed away in October and in our Buddhist community, we were doing a 49-day – the Buddhists believe that the soul transmigrates the physical plane for 49 days after they leave this existence. So we were doing a ceremony, honoring going into his next karma, so to speak. So, that's why I wasn't there, and I often wished – it was the one that I really would have loved to have been at, and I remember seeing the posters of these women with these guns. I think there were pictures of these women from Iran or somewhere – shooting. I never got the poster, but I loved that poster, because for me, it felt like that's what it was. So, that's when my involvement really picked up – after that action.

Tape II
00:00:00

SS: So when you first came to ACT UP, did you know anyone there?

EG: No, I might have been brought by my friend John, who was an attorney. John wasn't very active. He said he didn't like groups. He liked the energy, but he didn't like groups. He wasn't a joiner. I said, that's fine. I did attend a couple of times with somebody later on. His name is Kendall Thomas. And Kendall was involved peripherally or on some degree – some level with ACT UP. I just don't know to what extent. After I kind of learned the ropes in the groups, I just sort of made my own way. I got very close over time, with Joe Franco, and that was very illuminating, in many respects.

SS: Why? Do you want to talk about it a little?

EG: Joe – for people who remember him – was a very intense person. And, I didn't know this at the time, but it turns out that there are a lot of people like Joe that I am very attracted to. I'm not talking about sexually – it's their energy. From different kinds

of psychology, we understand that there's different archetypes – and he was one particular archetype. And it turns out my partner is that archetype, and so is my Zen teacher and friend. But, there's levels of involvement with the issues that they're working out, and how they work them out on the larger stage. Joe's playing out – his archetype, was in a very public way – very much in your face, and it was either his way or no way. But, he brought a lot of energy to whatever situation he was working with. And, I think what happened is that he – I did a counseling and testing course with the Department of Health, and Joe was one of the facilitators. The way that they constructed that process – it was very experiential. And, the way they constructed the process – the day when the person is getting informed of the result, that person was Joe, and Joe wasn't part of the presentation. So, the crowd was left wondering what happened. That was all set up, it was all intentional. But, it really pulled on people's strings, because we knew, but he didn't know as part of the process that he was going to be told he was positive. So, it really helped people process their feelings about getting tested, and getting positive and negative results. I had already been tested and with the little stuff that I had done, I assumed I was going to be positive, and when I wasn't, I was like okay – well, I guess that's good. But, the activity I remember the most is the time when he took a bunch of women, and we went to a conference. I don't know whether it was in Washington or Baltimore, or where it was. And, it was all women of color. And he was trying to get ACT UP – the membership – to really recognize that AIDS was a women's issue. And Joe was very manipulative, and I don't remember how we got the bus money, and I don't know how we got these women into this meeting, but they got in. And they were very, very articulate.

SS: Who were some of the women, do you remember?

EG: I think one of them might have been Katrina Haslip. I think the other one – her first name might have been Tracy. I know Joe used to have on his answering machine something he had recorded that she had said. “I’m a woman, I’m HIV-positive, and I’m not going to take this anymore.” Some little snippet. So, anytime you called him in Brooklyn, you wouldn’t get him or his dogs or anything else – it was that. But, women’s issues were a big thing for him, and I learned a lot because – I remember what happened with my patient when I was at Ryan, and you know, the definitions hadn’t been changed. So, there were all these issues going on in the background. For me, it was always about raising my consciousness more, and learning about the real issues about housing, about poverty, about misogyny. That was the real message of ACT UP was not – that it wasn’t just about getting drugs into bodies. To me, that was a proxy for the other issues that were much more root causes of why people couldn’t get drugs into bodies. That’s how I saw it.

SS: So, where did you decide to put your energy?

EG: I started attending different meetings – different subcommittees. I remember going to Treatment and Data and thinking, I don’t want to deal with this. I’m a doctor; I deal with this all day long. To me – the science of this is to me, boring. I attended housing meetings and the Housing Committee later came into being and formed into what’s now called Housing Works. Of course, there were Latino issues, once those got settled. I don’t know that I was very active in any other specific groups. Whatever caught my fancy – it was sort of, like – my nature was, if this committee was three people and needed some help, I just went where I could help. If this committee had tons of

people – I noticed a lot of people didn't want to do the mundane things, and I thought really, an army wins its battles by making sure that mundane things get done. So, if people needed help with Xeroxing or doing boards or something – that's what I did.

SS: But the main focus of your work was the Latino Caucus, is that right?

EG: Yeah.

SS: So, could you tell us the history of the Caucus, how it got started and who started it, and why?

EG: As I recall – again, I was very much in Joe's orbit – so, Joe went this way, I would sort of follow – not that I couldn't make my own choices, but there was a real strong transference between me and him, and he relied on me a lot, in many different ways. So, I felt very – I needed to help. There were times that I didn't want to be talking to him in the middle of the morning about something he was trying to work on. I wanted to get to sleep. I had to work the next day. But, somehow, I was pulled. I couldn't say no. But, the Caucus – I remember, we were at the space already, I think on 29th Street or 30th Street – somewhere around there. And, I remember meeting at a table and Gonzalo Aburto was there, Cesar Carrasco, Rita, and Belen and her husband – I can't remember his name now. I think the issue was to try to raise the consciousness of the organization – that ACT UP needed to address Latino issues within the context of this struggle. And, I think there was the understanding – that we got it, and we knew that there were other people in ACT UP that got it, that this – for me anyway – that AIDS is and was, and will always remain a political struggle. Yes, it's about biology, and yes, it's about drugs, but to me, it's as – I saw what happened to – what I remember reading and experiencing about Lorca's passing. That was a political act. His demise was a political act. It was

calculated. Just as this crisis was being drawn out, for whatever political reasons, it was and remains a political struggle. And, I think that the focus of the Latino Caucus – at least, as I recall it – was to try and maintain that consciousness, within the rest of the organization. I know that people like Maxine [Wolfe] got it and I know that other people got it. But, I also know that other individuals were like, no, we need to stay focused just on this. We need to stay focused just on medications or treatment.

SS: Do you remember any kind of specific conversation in the organization, where those lines were drawn?

EG: I remember having them informally within the Caucus. There were people who felt strongly that it was more of a treatment issue. But, the majority was always felt and saw it in the larger context. I was also working on a Master's in Public Administration at NYU at the time, and I remember Rita and José – I think his name is José Santini – introducing me to this book by Paulo Freire, *The Pedagogy of the Oppressed*, about how to raise people's consciousness and get them to move. So, I think within our group, we knew that there were many different and deeper roots that you were going to have to tackle AIDS on other than just the treatment.

SS: So, what were some of the concrete actions that the Caucus took or pushed for?

EG: Well, I remember one particular challenge we had was trying to raise money for Caucus activities, and we brainstormed one time and basically we made the discussion – this outfit in Queens, Musica Against Drugs – we had this idea that if we could reach the Latino community through the vehicle of music, that we could bring AIDS and services in that way. If that was a language that people understood and could

relate to and it was non-threatening, why not do it that way? But, we needed to create the organization, and the organization needed money. So, I remember bringing – and we probably brought this up before the whole membership, and I remember standing on the dais at Cooper Union, having this debate with the larger – with that circus that it was back then. And, I don't remember how much money we were finally able to wrestle from the organization. It might have been \$5,000, it might have been \$10,000, but there were some real challenges. And there were people saying, "We're not a service organization. We not in the business of providing services." We're an advocacy – this is what we do. And, by sort of morphing into all these different activities, we're diluting what we're all about.

SS: How did you feel about that argument – that ACT UP wasn't a service organization?

EG: I thought it was simple, actually. I never questioned the honesty or the integrity of the people who were formulating those positions, but I also thought it was a very simplistic way of looking at how to address the HIV crisis. The other parallel conversations that were going on in my head, and with a few other people within the Latino Caucus was what GMHC was or was not doing. And to this day, I believe that GMHC and the powers that be – the AIDS establishment at the time – missed a golden opportunity of not reaching out and developing other organizations within communities of color, and other communities, like the IDU community, to really teach them some of the skills – develop some of the skills in those communities – what we had learned, not only in advocacy like in ACT UP, but in the service delivery model. And that sort of

balkanization of the AIDS community was, I suspect – and I feel one of the reasons why the movement isn't as strong today as it was back then.

SS: Because of this division between service and activism?

EG: Yeah, and between communities of color – those that had the resources – the Ryan White funding, the ear of the government, so to speak. We needed – GHMC and other people who were in those positions who had some resources, to me, should have had the foresight to say, okay, we need to have a Latino version of GMHC. We need to have an African American version, or an Asian Pacific Islander version of what we're all about. What would it take for us to share some of our resources, and develop and nurture those organizations, so that that way, when we have to show up in Washington or Albany or in City Hall – we're not just talking gay white men organization, we're talking about a multitude of organizations that represent all the HIV community?

SS: But, isn't it ironic – I'm just going to argue with you for a minute – that Gay Men's Health Crisis ended up being the primary service provider to people of color with AIDS?

EG: I feel like there are a lot of ironies in this struggle. And sometimes I thought, well, if the government hadn't shut us out, but instead acknowledged HIV and AIDS from the beginning, would we have had the emergence of all this activism? I can't really say how it should have turned out. Maybe it turned out just the way it did.

SS: What was the relationship between the Latino Caucus and other Latino AIDS organizations? If you could be specific.

EG: I remember one incident – again, involving Joe Franco. Joe was working for the Hispanic AIDS Forum, and lost his job. And again, I don't know the particulars around – it was always Joe's story, and there was what really happened. Even on the other side, it was never clear what really happened. But, we actually confronted the Board of the Hispanic AIDS Forum, and basically put them on notice that there needed to be some due process in how this was done. And that they really should be careful, and that we would get back with them. I don't know if anything came out of that, other than the undying enmity between Miguelina Maldonado, who was the head of the organization at the time, and Joe Franco, and the Board of that organization, and the Latino Caucus.

SS: But did they have a different agenda than you guys did?

EG: I don't really know what their agenda was, to tell you the truth. I don't know that we ever really paid a lot of attention to them. You know, we were so fluid that we sort of went wherever we could kind of get some consensus around.

SS: Now, there was a group of women with AIDS who came into ACT UP, and came into the Latino Caucus. Were you working with them?

EG: I remember doing a little bit of work with Marina [Alvarez], Rita and Belen, but those are the only ones I – if you mention names, I'd say, oh yeah, I did do stuff with her. Lydia Awadala.

SS: These were straight women and you were gay guys and there's a lot of class difference. How did you all negotiate your relationship?

EG: I found it, actually, very easy. For some reason or other, there wasn't a lot of transference between us and the women. We sort of knew we were coming from the same place. The women had a way of speaking that always, to me, cut to the chase.

Tape II
00:20:00

Guys would be arguing, and you know, it's like for some reason or another – guys, it's an ego thing. Don't ask me for examples; this was a long time ago. I remember when they were there participating, we could work through things a lot quicker.

SS: What about inside the Latino Caucus, the difference between the Puerto Ricans or the Nuyoricans and the Latin Americans? Was there a difference in analysis?

EG: I don't think so, no. I was very aware that I was a physician, that I had an income that was much greater than any of them. And, I always tried to be very respectful about where people were and try to help out. If anybody needed anything, needed a referral or needed some information, I would do what I could. But, I also knew that I had a certain amount of privilege that they didn't have, and so I was very careful about that. I was very sensitive to it. But, it wasn't a big thing for me.

SS: Now, were you involved in needle exchange at all?

EG: I remember doing a few needle exchange activities – maybe manning some. I remember checking in with – and talking with people like Allen Clear. One of the Latino Caucus members – what was his name? Rodriguez. A tall thin guy – now I'm remembering these guys. There were several IDUs that were straight men, and it was like – it wasn't even an issue. But again, they were able to – the issue wasn't so much around gender. It wasn't around background. It was about whatever strategies we needed to come up with, to deal with the issue at hand. I don't experience it – or remember experiencing it, as a class or gender thing.

SS: I'm still really unclear about exactly what you, the Latino Caucus, did. What were the actions? What were the coalitions? What were the goals? What were the proposals that you were involved in?

EG: I don't really think that the Caucus was as well formed and solid and cohesive as the other groups were. I'm not sure why. It was very much a rudderless group. Maybe if we had focused a little bit more, met more often and chosen our issues. But, it wasn't like that.

SS: Okay. So, how did you guys deal with it when somebody got sick inside the group?

EG: I'm trying to remember who I knew. There were a couple of guys, I think, that did get sick, during that period. I'm not sure one of them had HIV though, but he was very much – Salazar – I don't remember his first name. And, the other one – I know he was very tight with the whole organization, because he actually facilitated some of the meetings – he was a little guy – Robert Garcia. He was a really sweet, gentle person. But, I don't remember him being totally involved on a regular basis with the Caucus. But, I know that when they both passed, it was really tough. People almost sort of retreated. When someone passed away, it was sort of like – people would go into their shells and go into their own private spaces. It wasn't a kind of collective grief type of thing.

SS: How about for you personally, was there anyone whose illness you got really deeply involved with?

EG: Yeah, I developed a very close relationship with Tom Cunningham. There was something about the way Tom held himself. He was a person above the fray. It's

sort of, like – he was enlightened. Remember, I’m studying Buddhism, hearing from my teacher what it means to be enlightened, and I’m in this milieu called ACT UP – which by the way, my teacher Bernie Glassman really loved ACT UP. He thought it was one of the best things that ever happened, because his whole schtick is social action. So, for him – being a Buddhist was not sitting on the cushion and ignoring what was going on in the marketplace. Buddhism was what was going on in the marketplace. The cushion was just something you did to help you function in the marketplace. But Tom, to me, embodied a kind of moral clarity, and understood how all these issues interfaced with each other. And, I remember visiting him. And, I remember telling him about this movie I had seen about Native Americans on television, and the song that Buffy St. Marie had sung. And he said, “I love Buffy St. Marie.” He said, “I have that tape with that song,” and I said, “Oh, please, would you make a copy for me?” And he did. And I would visit him, and I would always call him and say, “Would you like company? Do you need anything? Can I come and visit with you?” Even if it was just for a few minutes. So, at some point I knew he was not going to make it, and he passed away. And I went with Roma [Baran] and a few other people one wintry day, out to Long Island for his – he didn’t want this, but his family did. They had a Mass for him. You had to drive through the snow and the slush and everything to get there. This guy was also sick – a friend of Tom’s. I don’t remember his name. I went to Brooklyn, and he had a car and we drove. We all sat in the back and I remember going to Pine Lawn and they’re having their service there. And I remember being in some pew, and I was bawling my head off. I was in this space, and the next thing I remember was a hand sort of shaking me, and it’s Tom’s mother. And she told me, it was going to be okay, and that Tom was okay.

And, of course, I had lost other friends then. But, it's how I held him and how he held me, and how we sort of could sit in the same space and just listen to music and we didn't have to say anything. We didn't have to communicate. And, I had patients who it was like that with. Willie Rodriguez is the other Latino Caucus person who was an IDU. Betty Williams was very close to him, and I know there was a lot of struggle around his passing – something having to do with money or burying him. It was some high drama. I observed people in the AIDS struggle being and becoming enlightened. Even if I didn't know – I never had a personal enlightenment experience – although, again Bernie says – and his patriarchs and teachers say from way back, that we're always being enlightened every moment of the day, if we're just awake enough to get that. So, there were many enlightened souls in ACT UP, whether they even knew it or not – whether they were being negative or not. They were in their space, in their zone, and they were doing what they had to do to address this crisis.

Tape II
00:30:00

SS: Can you tell us a moment – a particular person, what they did that showed you they were enlightened?

EG: It didn't necessarily happen within ACT UP, but it was the awareness and shifting consciousness that happened to me within ACT UP that I then experienced on a one-to-one basis with my patients. And, I remember taking care of a guy who was homeless, who lived in Tompkins Square Park – was part of some of the riots that happened. His name was Terry – Terry something – an African American guy. And the social worker and I worked very closely with him. And he ended up developing KS, and it spread into his lungs. And we just knew it was a matter of time, when he would probably bleed out or something. But I remember being in an exam room with him, and

him sitting across me, and we just sort of looked at each other and I said, “Terry, I don’t know when I’ll get to see you again, because my schedules change, something might happen to you. Is there anything you want to say?” And he said, “No.” He said, “It hasn’t been the life I wanted to live, but you know, I have to say, I’m okay with where I’m at, now.” He was at complete peace with himself. He said, “I lived in the streets, I shot drugs, I messed around, I still liked the babes.” And there was levity, but there was – he had gotten to this place where it was okay. And I remember feeling that way around Tom Cunningham, around Katrina Haslip. There were individuals who were so clear about how they were seeing their lives, and how their lives had unfolded, that they were completely at peace with themselves.

SS: Can you help us remember Katrina a little bit? Is there any incident or moment that stands out in your mind?

EG: I remember mostly her – she had a nasal twang to her, and the most sparkly eyes – dark eyes, and the most beautiful smile. And, somehow, she had this Earth Mother radiance about her – just a very peaceful sense. And then, when I heard her story – that she had come out of Bedford, and was doing all these education things. I was like, again, I came from a very middle class background, and I experience individuals from backgrounds that I never had been exposed to – prior to my coming here to New York, and getting involved with the challenge that was AIDS, and healthcare in the city. But, it was the way she expressed herself in meetings. If there was an issue that needed some – the attention of the group – that there was some singularity of purpose, Katrina could just cut to the chase. And that’s the way that Tom was. In Buddhism, there are deities – Manjushri, which is the deity that deals the diamond scepter, that cuts through

all illusion – and that’s what they represented to me -- the ability to cut through the delusions and the craziness, because we all remember how crazy those meetings were.

They were a circus.

SS: Why do you think they were so crazy?

EG: That was just anarchic nature of the process – the leaderless aspect. I think there were probably de facto leaders. There were people who were manipulating the whole organization and could get whatever they wanted.

SS: Like who?

EG: Well, I think Larry Kramer had a way of kind of electrifying the group. I don’t know if he necessarily was a leader. I really feel that Peter Staley was a leader – whether he wanted to or not, and whether I agreed with his strategies or not. But, that was – I always wanted to operate behind the scenes. I didn’t mind being in front, and I wasn’t afraid of being in front of the crowd, but it wasn’t where I felt I could be most effective. It was, in some ways, it felt like a circus.

SS: When did you leave ACT UP?

EG: I think I stopped participating around 1991. It was around that time that I was changing jobs, and I had decided to go to school. And Joe, and my friend Chip, started to unravel. And somewhere around 1992, I met someone, and I said, hey, that’s what happens, you fall in love, and your activism goes out the window. And many people told me that’s not uncommon. So, I really wondered about that philosophy. Gee, if that is true – if that’s happened in other movements, where people do fall in love, and their activism goes out, why that is? What’s the connection between being in love, and not being an activist, in that kind of traditional sense anymore, but I never discovered it.

I'm sure, maybe Maxine or Ann Northrop or somebody might have some idea. And, it might actually be fun to kibitz with people, as to what the connection is, with all that.

SS: So, it was because of internal changes in your own life, not in reaction to things that were going on.

EG: I could see that the spirit was starting to go. I think by then, Housing Works was already on the road to being established. It was just seeing that the groups were starting to fragment, and it was getting increasingly difficult to keep that circus going.

SS: I only have one last question. Looking back, in terms of your own contribution – what is the thing that you brought to ACT UP that you feel the best about?

EG: I think the contribution that I feel like I made the most was bringing my most authentic self. I had been raised in a very political household. Our county, our town, our part of Texas was very political – it's always been very political. Somehow, the politics of New York were like, oh, this is just the same thing I grew up in, except it's magnified a thousand times, or a hundred thousand times. So, what I was able to bring to ACT UP was just kind of, the self that I've always been. But, it took that birthing of that consciousness in reading that book, and just everything that happened around me, for me to kind of go and to have ACT UP become a vehicle that allowed me to, kind of become – I'm now working for New York City Health and Hospitals Corporation, in a very senior position, and doing some of the things that I wanted to do back then, which was to effect change – effect change not only within, and the people who deliver the services on behalf of the corporation. But to effect change on the people who actually receive the services

of the corporation. It's funny, but not so funny, that 12 years – I don't remember when I started my degree – but 11 or 12 years later, I am exactly where I need to be right now.

And ACT UP was definitely part of that process.

SS: Okay, thank you so much.

EG: You're welcome.

[END OF INTERVIEW]