CraigRose 20200630 transcript

LIZ BRADURY: [00:00:00] -- audio. Whoops. I'm going to start the recording thing, record on this computer. There we go.

And I'm going to say these things. Uh-oh.

ROSE CRAIG: (inaudible) lost you. Hold on.

LB: There we go.

RC: You there?

LB: Yeah.

RC: All right, I was trying to turn up my volume. There we go.

LB: Oh, that's good. I'm going to do that too. Okay, there we go, I'm starting again. So, with this project,

Bradbury-Sullivan LGBT Community Center and the Trexler

Library at Muhlenberg College will collaborate on forty

years of public health experiences in the Lehigh Valley

LGBT community, collecting and curating local LGBT health

experiences from HIV/AIDS to COVID-19. [00:01:00] My name

is Liz Bradbury, and I'm here with Rose Craig to talk about

her experiences in Lehigh Valley LGBT community during this

time of the COVID-19 pandemic as part of the Lehigh Valley

LGBT Community Archive. We're meeting on Zoom on June

thirtieth, and Rose, what town are you in?

RC: I'm actually in Columbus, Ohio right now.

LB: Okay, all righty. That's good. Now I have to go to page two. There we go. Thank you so much for your willingness to speak with us today. To start, can you please state your full name and spell it for me?

RC: Yeah, it's actually Rosemary Craig, known as Rose, and Craig is C-R-A-I-G.

LB: Okay. And, will you please share your birthdate?

RC: The year too?

LB: You don't have to. (laughter) [00:02:00] You don't have to. It's okay if you can't --

RC: November twenty-seventh, a long time ago.

LB: Okay. Do you consent to this interview today?

RC: Yes, I do.

LB: Do you consent to having this interview being transcribed, digitized, and made publicly available online in searchable formats?

RC: Yes, I do.

LB: Do you consent to the LGBT Archive using your interview for educational purposes on other formats, including films, articles, websites, presentations, and other formats?

RC: Yes.

LB: Said that twice. Do you understand that you will have thirty days after the electronic delivery of the transcript to review your interview, identify any parts you'd like to

delete, or withdraw, from your interview from the project? So we will send you a transcribed interview, and if there are parts that you want to tweak up, that's fine. If you say, I hate this whole thing, we can throw it out, we can do it again if you want. [00:03:00] Although I'm sure it'll be fine.

RC: I'm sure it will.

LB: So, okay. So then I start by saying, in the midst of the current public health crisis that we are experiencing, we want to take this opportunity to look back and reflect, and to capture the stories of those who lived through the worst of the HIV/AIDS epidemic in the nineteen-forties and through the nineties, and we're really specifically talking about nineteen eighty-five to nineteen ninety-three. So, the first question, and really you can say whatever you want on this Rose, but -- and you can, whatever you want.

But do you remember the first time you became aware of AIDS and HIV?

RC: Yes, I actually do; I remember that. And it was probably around nineteen eighty-five, I would say, and I was -- I think I was the last president of the [00:04:00] Lehigh Valley Gay and Lesbian Community Center, located in Allentown, Eighth and Hamilton. And we began to hear things and stories from our friends, mostly the boys, as we

called them, went to New York, there was a lot of that, to the big city, because we had easy access, and they came back with stories of people getting sick, and you know, we were, really, we felt bad about it, but we really didn't know it'd be anything in relationship to us; we just thought it was a New York thing. And at that time, nobody knew what it was, whether it was a flu, kind of like the COVID situation, or cancer, perhaps. But, in very short time, people began dying from it. So there was only a tiny, tiny space between learning about it and suddenly a lot of dead [00:05:00] people. But still, that was in New York. It didn't take more than a month or two for some of our friends, and good friends at the Community Center began getting ill. And back then, as I recall, it was a quick dive. It was not a long, long, long time between contracting whatever this was and then really bedridden and then dead, frankly. The hospitals didn't know what to do with them. In the hospitals, they had quarantines of all sorts because nobody knew what it was, but everybody knew they were gay men, so that was one of our first battles was getting that to stop, [00:06:00] so that they weren't singled out or anything. You know, back in the eighties, it was a very -- it was progressivist for us to even have a community center in Allentown, and we not only were a

social group, but we also helped change the law in Allentown with the human relations commission, Melissa Lee was the head back then, and we got gays and lesbians on as a protected class in Allentown, and we also had worked with a couple school districts to do the same. So, you know, we had a little bit of politics going, certainly an awareness of it, but it was nothing like the deep water we got into when AIDS really came to town.

LB: Right, yeah. So you were involved with the community center, and then you had additional involvement. I'm just going to turn off my air conditioner, but go ahead and [00:07:00] just take a second. But you were involved with the AIDS Services Center too, is that true?

RC: Yeah, absolutely. Actually, that came about from the community center. We were beginning to have so many people that, you know, we socialized with all the time getting ill that suddenly there were not many more parties, frankly, but it was mostly, okay, how do we help our friends? You know, and it was a joint effort by the guys and the lesbians. Dixie White was a great trooper with myself and a couple of other women, that were pretty good organizers; we both had had long histories organizing the community around different issues, and at that point, and again, I was the last president, so I proposed that we, [00:08:00]

instead of being a community center, we change ourselves to being a service center, and we only took our models from New York, Philadelphia, there weren't many towns or areas our size that had this. But because of our proximity, I think, to New York, we had a lot of people who were in and out of the big towns, so. So we got besieged pretty quickly, and it didn't take long at all for all of us to agree that that's what we need to do. So we dissolved the community center, and we began the AIDS Services Center. We moved out of our location in Allentown and moved into a smaller place in Bethlehem, and Dixie White was the first executive director, and again, because she'd had a lot of experience at organizing, we were able to get the organization up-and-running within a few months. So we had a board of directors; we had everything we needed [00:09:00] for the 501(c)3 application, got that approved. Part of my job was to get out there and sell this to the typical regular funders in the community to make them aware of what was going on. Because back then, nobody was really talking about it, especially in Allentown or Bethlehem, or at least in Pennsylvania. And the whole issue about being gay was again something that wasn't a real popular topic. Yeah, so.

- LB: Where was the community center, do you remember? Was that on Hamilton Street?
- RC: It was on Eighth and Hamilton, up above, on the second floor.
- LB: I'm losing your picture; your picture is disappearing. Can you tilt your phone a little bit? There, that's perfect.
- RC: I got excited thinking about the Chinese restaurant, Rubes, right below us. Yeah, it was around, I guess Eighth and Hamilton, Ninth and Hamilton, up on the second floor, [00:10:00] on the south side, and it was a great big area because again we were a community center, so we were having parties and dances and all the other kind of stuff. So, we knew that that wasn't going to work for what we needed to do, and so that's why we got out of that place and went into a smaller place, and started the business of taking care of people.
- LB: Yeah. And so, when you moved to Bethlehem, do you remember where that was, the address of that, approximately?
- RC: Yeah, I've been trying to think of that today, and can't remember where it was. But it was probably, not quite in downtown, but right around that neighborhood of downtown in Bethlehem. So we just moved one city over, and then eventually, we moved to a suite of rooms in a space in

downtown Bethlehem, so that was a [00:11:00] real nice space.

LB: I think I remember where that was, yeah. So, when you were

-- so when people were saying to you, like people are dying
and stuff. What was some of the stuff that you were

providing in terms of services for people?

RC: That's a good question. Part of what we provided at that point in time, now, there were people in the community, and people associated with us that were really doing the handholding, feeding, taking care of, wiping the behinds of our friends who got ill quickly; there were a lot of angels out there doing that kind of work. And we were certainly associated with that. Sorry. One of the skills that we could actually bring was the fact that we knew -- both [00:12:00] Dixie and I knew how to navigate the system, the human relations system, and the nonprofit system within the Lehigh Valley. And it was important, because part of what we had to do was also educate, to inform the community about what this was, why this was important, and again, it just brought out a whole lot of different issues. But we know how to work that, and we did. We politically were very savvy and knew how to work that aspect of it. At the same time, we went out there and we hustled money, and this was the time that actually FACT grew out of that; Brian and

several of the guys thought, okay, we really need to get an arm of raising money from our community. And they, I understand, continue to do that, and have done an extraordinary job. And that's kind of where the guys went [00:13:00] more into that area of fundraising, which was great. So we took on the politics; we took on the day-to-day coordination, and they took a lot of the fundraising. Myself and a couple of others went after grants and things which were just beginning to show, money for AIDS, the Ryan White bill was huge, and bringing actual money from the government. So, we jumped on all of that, and wrote grants and did things like that, and also looked for corporate sponsors to see if we could find some. So that was a whole bit of what we were doing. So we knew that we wanted to add case management, was what we called it at the time, and basically, that was a matter of looking at the person, sort of holistically, and seeing, what did they need? Did they need a place to stay? Did they need some nursing care? Did they need food? You know, what was it that each particular person needed? So in order to coordinate [00:14:00] that, we needed to hire some people who could actually do that social work aspect of making sure that the needs were met. And so that grew to be a very important part of what we did, and what we provided

for the community, and also an important part of the grant-writing so that we had something to offer.

Now at this same time, it's kind of like having plates spinning in the air, because there were several things going on at the time as well. Part of it was the religious community; there were courageous people within the religious community who were also looking at this issue, and I'll very proudly talk about our association with the Episcopal diocese, was wonderful, from the beginning. There were Catholic priests from the beginning who were willing to -- it was in the basement of the church, [00:15:00] but were willing to give -- I mean, we had to think of the whole thing, including funerals and burying people. And don't forget at that time, and I suppose this still goes on, but at that time, there was a lot of separation of people from their families, and the community became people's family, so there weren't the usual supports in place that one might expect if you had cancer, or something like that. So it was -- we had to all be involved doing it all for that particular person. And we shot up very quickly until we were covering about three-hundred people -- three-hundred people a year at least in servicing all that stuff.

- LB: So people would come to you, or they would be referred or something, and then they would be --
- Oh yeah, it was like, "Hey Joe is in trouble; he's down the RC: street." You know, it was a very great network of people who [00:16:00] knew people. And you know, again, this all evolved out of our friends dying, and, so -- and us trying to figure out what the hell can we do to do that, and that was the basic reason why it all went that way. And you know, again, the religious community came in and supported, and then as I said earlier, the Ryan White money began to be available. And I was just talking to Kathleen Kelly who is a good friend who was head of human services and drug and alcohol and all those things for Northampton County, and her counterpoint in Lehigh County, were looking at this money and saying, okay, how can we help? Because by this time also, the health bureaus were involved from each city, magnificently involved and wonderful. [00:17:00] So many, so many people, I couldn't even, you know, remember all the names of all the people who came forward from the beginning. And that was so important to the community. So anyway, we, and Billy Leh, and people like that, we wrote the first big government grant that was like a million dollars to get some of that into the Lehigh Valley, and then out of that, we needed to, we needed to have a

coordinating base. It wasn't the AIDS service center, because we were too busy then providing services; we were really busy. I think out of that, the AIDS Task Force group, and that was made up of a whole lot of different people, not only from the service area, but from the religious area, from the business community and government, and so this was the first place that everybody was kind of coming around that table, and looking at each other and saying, okay, we've got a major health crisis here, you know, and it's with [00:18:00] a group of people, a community that are not very popular; again, people didn't want to talk about, certainly, AIDS, and they also, you know, it was just a hard time to be gay. Anyway, but as we all well know, all of us older people know. But we all came around this table and sort of looked at each other like, "Okay, well what are we going to do here?" And we did get the grant, and we did come up with ways to get the money, setting up a way to give the money out to certain organizations within the community to best spend it, including the health bureaus and everything, and because it was a, we're trying to think today, when I was talking to Kathleen, it must have been a federal grant that came down to the states. So there were a lot of crossing Ts and dotting Is, and a lot of follow-up [00:19:00] with, okay

you have to do this. You know, but we had people who knew how to do that, and they all volunteered to be part of this AIDS task force, and so that's when it kind of really got off the ground that we were a movement here in the Lehigh Valley.

- LB: When that happened and you got that money, do you know about when that was?
- RC: That must have been around, I would say, venture to say maybe eighty-eight, eighty-nine?
- LB: Okay, so that's really in the height of stuff. So when you
- RC: So actually, you know, it was a little earlier than that because, no it was eighty-eight, eighty-nine, around that time.
- LB: When that happened, and you had that money, so if somebody came, I mean, AIDS, oh there's a huge rainbow out my window. That's -- It's an omen. So, the folks -- I've interviewed a number of people already [00:20:00] and they were talking about FACT, and what FACT did, and where they funneled their money. But for AIDS services center, when you're talking about case management, was that specifically to try to get people into healthcare?
- RC: It was -- I mean, every month, practically, we were learning more about what this disease, and believe me, we

watched, and very closely, New York, Philadelphia, the big cities, San Francisco, you know, conversations with people there to find out, so how do you this? Or how do you do that? Because there were some, you know, unique things about this particular disease and situation. And so, we really were finding out more and more as we went along, and we matured as we were doing that. Believe me, not without a lot of pain and suffering by the people who were organizing. (laughs)

LB: Sure, I'm sure.

RC: As you know, Liz, [00:21:00] being an organizer yourself, you know, trying to get everybody, I didn't care if they were happy; I just wanted them at the table and contributing something, you know. As a lot of, lot of, dear old friends would say, you know, I was a real -- they called me "the bitch," but you know, there it is, a real straight-shooter. That was okay; we were fine with that.

No problem. And Dixie was the other bitch, but we were good. But they also loved us, and knew that we were really making a difference, and that was important too, so.

LB: "Bitch" is just another word for the person who gets things done.

RC: Exactly, that's exactly right. (laughs)

LB: You know, so. But I guess what I'm trying to find out is that, when the money came in, what did it go for? Did it go to support people's medical bills? Did it support their rent? Did it support everything? What kind of --

RC: Yes, yes, and yes. And it also supported education, and it supported funerals, and we [00:22:00] got to watch the metamorphosis of HIV/AIDS going from just gay men at that time on to other populations. And in the early nineties, for instance, I actually ended up being the executive director at the AIDS services center for a couple of years, and at that time, we were just discovering about the HIV, about, excuse me, the intravenous drug users, and so needle sharing, and all of that was just hitting the road. And the -- Lehigh Valley has always had a wonderful Latino population, and we were finding more and more that it was hitting that population hard. And not only the person who was doing the shooting, but also [00:23:00] family members, we had children. So all of this was, again, this maturing, this rolling on and seeing oh my god, okay, now what do we do with that, you know, how do we -- we got to take care of a family. The family needs their rent, you know, so we just went on and on. And believe me, this money went quick.

LB: I bet.

And the education piece, though, was very, very important; I RC: don't know if you talked to anybody about that. But, we were out everywhere talking about condoms, you know, we were -- we had condoms everywhere, including my two teenage kids who were like, "Mom, can't you have cookies at the front door and not a bowl of condoms for us and our friends?" You know, but that was, you know, we're scared to death of how that could spread everywhere. So it was all tragic, tragic. But there were people, like I said in the community, gay and straight, who just [00:24:00] held the torch for all of this, and I'll just, I'll never forget losing a couple of very close friends, some guys, and also when it hit the kids, that was, that was heartbreaking. I remember kids that we would drop things off for, and you know, four years old, five years old, babies, all of that. So it was, it was a nasty thing. Meanwhile, the rest of the community had some, a semblance of looking at this and saying, "Oh, this is bad," you know. We had reduced the number of people who were saying things like, "Well, that's what they deserve," because I don't know how you say that to a child. So you know, that was something [00:25:00] I could, you know, really promote to banks and places like that to give money. It's a terrible thing to say, but you know, we hustled everywhere, everywhere, and there are some

banks, like, I'll say Chase Bank was one of the very first to come on board, and you know, there were just some businesses that got it, and stayed involved, and we were lucky to have some of those in the Lehigh Valley.

LB: Did you have any politicians that were really in your corner that you should name, I'd love to hear about who those, because some of them were terrific, I know.

RC: Yeah. We actually ended up having some people that were like state legislators, some mayors; I remember Bethlehem, and Allentown, you know, the people within their own organizations. You know, this was starting to be, everybody started to know somebody who had it. [00:26:00] And so it began that kind of a groundswell so that it popped up to higher levels. And there were some people, even within the school districts, who were, who came forward and did support. So I would say, you know, I wouldn't say any of that happened overnight, and I wouldn't say any of that happened without a lot of effort and a lot of tears. I remember myself and another good friend, a guy, we used to be the spokespeople; we'd go out and talk about what it was like to be mainstream, because neither he, he worked, he had a very important job at Air Products and you know, I looked like everybody's chubby mother, you

know? So we would go out and talk to people about, so this
is what gay looks like too, you know, and --

LB: Who was that?

RC: -- we went to the universities and things like that, and tried to enlighten people as [00:27:00] much as we could.

LB: Who was that from Air Products? Was it Charlie?

RC: Charlie Versaggi.

LB: Charlie Versaggi, I was just talking to him a few minutes ago.

RC: Love him; he's a darling. Yeah, oh he'll remember all that.

LB: I'm going to interview him at the end of the week, so yeah.

RC: Oh, good. Well that was a lot, the community center, we did that to upgrade, but all of that helped us then be able to communicate and talk about HIV/AIDS. And I knew many a straight wonderful woman who went out with their cucumber and condoms and you know. (laughs) We're giving that talk all over, bless their hearts, I really mean it. Bless their hearts; they were unafraid, and that was really something.

LB: When -- There was a time I think when people were, when you were talking about nineteen eighty-five when people were noticing that people were dying, and a lot of people didn't know what -- how this was happening. I remember,

[00:28:00] I was a college teacher then, and somebody, a student asking me, well how do you keep from getting it?

Because like, we didn't know where it was coming from, you know, how is it passed around? And was there a time that you can remember that you started to pinpoint that say, like, oh, this is how you keep from getting it, and this is what we need to tell people?

RC: Yeah, absolutely. We were in the pipeline early on, with the health bureaus, especially were very, very connected.

You know, and we learned from them. And again, the whole world was just learning this. It's so funny, when I see the doctor, can't think of his name of course at this moment, who is the one to believe about COVID, was the same guy who worked a lot on AIDS --

LB: I know, I know.

RC: -- yeah. [00:29:00] And so, we had our trusted sources that we paid attention to, and we learned and we learned, and we let anybody who knew something come in. It was a very open kind of, "What do you got it? Oh, come on in, you know. What can you do? Can you go do that school tomorrow?" (laughs) You know, so it was a community of people, and how we learned everything was by having some of those people be very smart and very connected to health systems and stuff. And like I said, we would call into New

York, or we would call into Philadelphia to say, "Hey, are you seeing this? You know, have you seen this yet?" And as we, at the AIDS Services Center grew, we hired more case managers and we had bilingual people, and you know, and they were right on the front line of, you know, figuring out how to do the best thing, and everybody shared every and all their information. [00:30:00] That was one of the things I think that always stayed with me, about how willing people were to contribute in any way that they could, and believe me, we were not without infighting and, you know, he said this, she said -- you know, that kind of thing. But the better good really is what ruled the day, and when it got right down to brass tacks, people were there.

LB: So, when you were doing this and you were doing case

management stuff, did you have specific doctors and health

care workers that you were referring to people who were

really like heroes at the time?

RC: Yes, absolutely.

LB: Can you remember some of those people?

RC: Can't remember a single name, but. (laughter)

LB: That's -- other people can.

RC: There were wonderful doctors, oh gosh, I'm sure if you talk to somebody who might have been there during the health

bureau, I remember at St. Luke's we had some wonderful ——
I'll tell you who would also know would be some of the
chaplains [00:31:00] from St. Luke's who have been there a
long while, Ann Huey would know some of this, as per,
because they worked very closely with the doctors too, so
that's a good source. I was on the end of hustle, so I was
not a direct care person ever. But I could get you
anything you needed to do it, and that was always my job,
so I don't have the, I don't remember the names of folks,
but they were there. They were there in every hospital
system. Sometimes they couldn't talk about it. And
sometimes it wasn't something that the hospital would even
talk about, but they were there; they were there.

LB: Yeah. So, you were talking about some of the corporations that were supportive, and how did you get into some of those places and get them to step up? Were there instances, and I know there were some corporations that had, you know, [00:32:00] CEOs who had children, adult children, who were sick, or who had HIV, and talk about some of that kind of stuff.

RC: Well, if you could find somebody, and there was always somebody who had a child that was gay. That was where they started. Or you know, it was not beneath us to reach out to anybody that we knew that maybe had a parent working

somewhere, and also, you know, some of us were very connected and into the community by that time. I -- When I first started this, I worked for the American Red Cross, and I ran several programs there, and when this became so, taking up some of my time, the Red Cross gave me permission to just focus on developing the AIDS -- now this had nothing to do, because we didn't do blood services in the Lehigh Valley. The Red Cross did, of course -- The Red Cross didn't do it, rather. But I was [00:33:00] given time and we had members of the board from the Red Cross. We'd just find one person who knew another person. churches brought in people. Dear, dear guy, who died recently I understand, Bill Coles, was from Dun & Bradstreet, and he was there. He was just -- He committed all the resources, you know, that he could. There were people from Beth Steel. You know, there was, Air Products became, and some of these people organizing this, some foundations locally, you know, we became really good friends with them, and just sort of said, "Hey, here we are. What can you help us with? What can you show us?" We were a very humble beginning, because it was like, we don't know what we're doing, but we're doing it, and it's got to be addressed; how can you help? You know. And it was one person [00:34:00] by one person. There was still big

corporations that didn't want anything to do with it, you know, that's fine. But we -- I have to say that everyone involved knew someone who knew someone who knew someone, and that, again, it was that groundswell that we started from the beginning, and reaching out, which I think is true community organizing, but it also got us up there with the big guys, and you know. We did a lot of that, as much as we could. And again, I count as friends some incredible people who were part of all that who gave a lot, at risk in some times, because it was new. Air Products is a good example of someone who said, "Okay Rose, you know, what's this about?" You know, and they were there, and Ed Meehan from the foundation [00:35:00] at Lehigh Valley Hospital. People like that, I mean, we were all together in this pretty quickly; we just, you know, converged.

- LB: Yeah. So, what was I going to say? I -- Okay, so there was a time when people were getting AIDS, or they were becoming infected; there was absolutely nothing they could do. I mean, you know -- It was a death sentence.
- RC: Oh yeah, there was no medication or anything. They were just trying to figure out what was it, and what were some of the symptoms, and you know, and again, all of that information rolled quickly through all -- the whole United States, in terms of, okay, look for these kind of sores.

Well, if they're having diarrhea and this, you know. So it rolled quick.

So but when -- There was a time, I think, [00:36:00] when LB: some medications, AZT, and some other medications, I was talking to somebody yesterday about a couple of medications, that he was a nurse, and he said, this isn't working; this is killing people. And it was a heart -- it was a medicine that was destroying people's hearts. It was such an interesting thing because I'd never heard of it before. Once there was medications involved, do you think, when was that shift, and how did that influence everything? That shift, as I recall, happened in the early nineties, RC: maybe ninety-three. I'm thinking around that time, when the -- we called it "the cocktail," of course, was starting to be given. And I'll tell you, everybody, doctors, everybody, were surprised as hell that this worked, (laughs) because nothing had worked before, the different things they tried. And suddenly, [00:37:00] I wish I were more knowledgeable on the, all the medical ends of it, but I don't -- and if I knew it once, I don't remember, but suddenly they got the right combination of things and it was having a real effect. So we moved from, as soon as you get it everybody, you're going to die, kind of thinking, to okay, well you know, there might be some people who aren't,

and so that grew then, of course, and that's the story today, grown so much better. But through all that, we still had to do a lot of prevention, because there were still scores of young people, young men getting the disease, and nothing you could tell anybody would stop them. And is that any different from what's going on right now? You know, people not wearing masks out on the beaches, stuff like that, it's like, [00:38:00] it's that invincible feeling that you have at certain span of years. Well that was the same thing with AIDS, you know, they were sure they weren't going to get it. You know, sometimes you were supposed to tell anybody if you had it. That became a legal issue later on. You know, it was -- so it brought out, as does any public health issue, I think, that gets to the pandemic stage, brought up every single corner of things that could go wrong, do go wrong, and trying to repair it and fix it, and you know, two steps forward, three steps back, that kind of thing. And that is to me reflected so much today in what we're currently battling. But that, on top of, we have to remember always, and this is why you're doing this wonderful work, that the basis was in the gay community, and [00:39:00] that was always a struggle; that was always because people, to change, it didn't happen overnight for a lot of people, but they were

willing to try, and eventually they had a whole different view of the community. But that was a long time coming. It was a lot of education that had to be made again and again and again and again. I don't know how many city council meetings in different cities did I talk to, to tell them why this is an issue that we all share; why this is important for Allentown, or Bethlehem, or Easton, to take this on as something that needed their support, needed their interest, and you know, just, it took a lot to do that. I think with the COVID, [00:40:00] there's not quite that stigma, I would guess, I don't know, that the gay people -- you know "the gay people" -- what we endured during that time. But I can also see the things that are happening today with, you know, the populations, the minority populations and such, you know, getting infected, most. Well of course, those are the same people who couldn't get anything, or have anything. We were lucky, actually in some ways, and starting, that it was gay white men who had money, and had income, and were willing to share. So, that was one thing, and have insurance, so it did start. That went all to hell quickly, believe me, but it did start with some people being resourced, as is very different from what we're experiencing today.

- LB: So, with regard to that, this is going back a little bit,

 [00:41:00] when you were doing education, were you able to

 get into schools, or were they not comfortable with that?

 I mean, some schools are so reticent about AIDS education.
- RC: Yeah, and I would say the religious schools never let us take a step towards them. But, the -- I'm trying to think of when that popped a little. I think it's because, we saw the importance of using the health bureaus to do that, because the health bureaus had a foot in a lot of places that we couldn't, as a community. So, they became our friends, and very willingly, they were. And so they got in under that, you know, that credibility, and was a great help. We knew people, we had all kinds, everywhere we went, we took condoms; I remember that. And believe me, that was not a popular [00:42:00] thing, and some of the social services, what are those things, that you get a fair, some place with all the social services, well we would come with our little pot of condoms, and you know, and do our thing, and sometimes, that was not viewed very well. But for the most time, we were all pretty ballsy, so we were right there, saying, uh-huh. Well let me tell you about this.
- LB: Yeah. I got to tell you, Rose now, because of my age, I do senior fairs sometimes, and I have a big bowl of condoms.

RC: Oh my gosh.

LB: And it's so funny. It's like I've actually said to the younger people at the center, if you want to have a hilarious, hysterical laugh, come and do this thing with the condoms with the seniors, because they're not, they're like, "Well, I just put my name on eHarmony, so maybe I should take two." I actually had a woman say that. So it's been pretty hilarious, you know? [00:43:00] I actually love that.

Well, going back to like nineteen ninety-three, I would RC: say, I remember taking all my stuff, dragging it up to one of the, I can't think of the nursing home, the county nursing home, in Northampton County, and so I, you know, set up my display next to, you know, the transportation, or Meals on Wheels, and everybody, you know. And I had to call my staff twice to bring me more condoms. And I talked to the nurses up there, and they said, oh yeah, there's a lot going on there, believe me. And it was, again, like you said, one of the funniest experiences. I thought well, life is not, it goes on, you know? And they didn't care much about AIDS, although they -- we still gave them the information. They had to take a brochure to read along with the condom, and so, but it was [00:44:00] hilarious, hilarious.

LB: It's pretty funny, isn't it? So I know that the bars were doing the summer games. You were probably going up there to set up with the summer games.

RC: Oh yeah.

LB: I would guess, yeah.

RC: Yup, up the Poconos, yeah.

LB: So, did you have a table there, or were you sort of working the room, or may speaking --

RC: Well, I was always working a room, as you can imagine. But we always had a table. Wherever we could take our information, we did. And we were blessed to have, like I said, a lot of people out there who were willing to go and, you know, have stuff out, answer questions, things like that. And we got to, testing was part of, I think, what we ended up doing too; I'm trying to remember all that. So there was, you know, important stuff to be done, and we just tried to be able to provide what we could provide, [00:45:00] you know, to the community.

LB: Yeah, what -- so yeah, now you know, it's interesting, because then tests took so long, and now, you know, we've got the twenty-minute testing stuff, and it's really significant at a pride festival where people can just go into a truck or something.

RC: I know. That's wonderful; it's incredible.

- LB: Because that was two weeks.
- RC: But again, the maturity of everything connected to this whole industry, I remember calling it that, and scaring some people. But it really was by that time. It was, you know, there was just so much to it, and so many different aspects of it that we had to figure out how to cover, so.
- LB: So, did AIDS services center have specific fundraisers?

 Did you do Rainbow Restaurants, was that Red Ribbon

 Restaurants, or was that --
- RC: Oh no, what did we do? It was -- I was hilarious, number one. I was always thrown in jail. [00:46:00]
- LB: Okay, one of those things.
- RC: Yeah, we had, I wish I could remember the name of it, but yes, we had wonderful, that you provided, you sold a table of people, and then you, servers, something, something with the word "servers" in it, somebody will remember it, but you know, you would fix a meal, and you would serve it to them, and it would cost them a certain amount, and if they wanted a fork, that would cost them another buck. You know, things like that, so we were very creative in doing that, and there were a whole lot of people, was it "Star Servers" or something like that, I don't know, it was hilarious; we did that. You know, there's nothing more fun than a group of gay people, actually. (laughter) When it

gets down to it. And of course FACT, always had their balls, which were -- that will be taken many different ways, I'm sure. But my point is, they always had a big celebration --

LB: The snowball.

RC: Yeah, snowball.

LB: They celebrated.

RC: (inaudible) [00:47:00]there wasn't a lot about that, yeah.

So you know, every way we could figure out to do it, we were trying to do it. But there were some very fun times connected to all that.

LB: Sure. But also, you were losing people, and I know that that was happening really quickly. I talked to one person who said that there were so many funerals that he had to stop going to them, because it was just too much for him and it was -- And Dave Moyer said to me, as I interviewed him last week, he said that, you know, it takes a while to get over the death of a friend, or a death of a close person. And if you're having that every week, or three times a month, or twice a month, or once a month, that it takes two years to get over the death of a close friend, and if you have six close friends die, and I think that that might have been some of the issues that you were

dealing with, were you providing mental health care too [00:48:00] for, that kind of stuff?

We were hooking people up. We had some wonderful RC: therapists. See, you're bringing up different things, and then I remember, oh yeah, that whole, the mental health piece. We had some wonderful therapists in the area that put their services right out, you know, free counseling and stuff like that. So we'd hook people up with that as well, so there were some, everything from psychiatrists to a therapist, so it was quite a network of people. And then, as I recall, when the counties were involved, we were able to get some of that stuff funded for people, so the services were free. We integrated it into, so you didn't know someone was going for a therapy for that as opposed to therapy for, you know, something else, bulimia or something. So we tried as much as we could to integrate people into the [00:49:00] regular systems, because there was such a need out there, and you know, so that's how we worked that. But it was a time of great tragedy, and great -- courage.

LB: Courage. Courage is the word.

RC: Yeah. And people, at the beginning, it happened so quickly, and I think that's probably some of what David's talking about. It just was, it was just right and left,

right and left. And it was a terrible time for all of that; we just didn't know quite know what to do, except to honor that person as best as we could, and that's what we did.

LB: And then organize.

RC: And then try to prevent less, you know, so it wouldn't spread to everybody. All, just like this big ball that rolled, and yeah.

LB: I have to say that, you know, [00:50:00] I was in the Valley then; I didn't know as many people, but I can really say that as a small community, which per se, compared to New York, Chicago, you know --

RC: Oh sure.

LB: San Francisco, there was an extraordinary response. And part of that was, because you had an organized community, because you had that community center already organized.

So how did that start? How did that -- Were you there -- let me just step back a little bit more -- because Dixie

White gave me a lot of her papers, and just, Elizabeth Goff just moved another fourteen boxes of Dixie's papers into the community center. They're all going to go into the Muhlenberg Archive, which is terrific.

RC: As they should.

- LB: And thank goodness that she kept that stuff, even though some people may have said it was hoarding, but still, we had those papers too, and they started that archive with about ten boxes of our papers, because we kept every single thing, and so it was real good that we did that.
- RC: You know, I think the AIDS Service Center, [00:51:00] I had like four boxes forever in my closet wherever I lived, like I got to get this back somewhere. And I finally did get it back, and I can't remember to whom--
- LB: Well if Dixie has it, we have it now.
- RC: I was going to say, probably you have it now --
- LB: That could be good.
- RC: -- forever kind of like, I got to get that to somebody, but yeah, it was precious. Precious stuff in there.
- LB: But, some of the papers that Dixie gave me were about the effort to pass the anti-discrimination ordinance inclusion in nineteen seventy-eight. And were you there for that?
- RC: I was around for that, yes. And I knew Melissa Lee; that was part of that. I don't think I was involved with the center at that point in time. I don't remember that.
- LB: Well I don't think they had the center. I don't think they had the center.
- RC: But I remember going into the hearings and being very vocal about the right with all of that, and stuff, so it was

[00:52:00] a strange time. In fact, back when that first one, I'm actually bisexual, and I was married at that time. I think I got divorced, but I had always been involved with justice issues and things like that, so that's why I got involved with that. And my brother was in the Bethlehem school district who helped get some of that going in the eighties, you know to make sure that people's sexual orientation was part of their -- so we grew up like that, our parents were social ministers, we had a soup kitchen in Philadelphia, so that's where our minds went and our thinking went. Yes, so it wasn't -- I didn't get involved with, I'm trying to think where I met Dixie. I didn't know Dixie at that time; I had seen her, but I didn't know her [00:53:00] at that time. I met her a little bit later, and I think it was around the, I don't know, it could have been a party; who knows?

LB: That effort was in nineteen seventy-eight, and then people came together to start the community center. I think Bob Whitman was involved with that, Bob Whitman and Frank Whalen.

RC: Oh Frank Whalen, yes.

LB: Yeah, he's still around. Well, I think they've moved to

Philadelphia now. But they've talked about that. And then
their papers, I think, are all at the library, although we

wish we had them because we're (inaudible) cataloging them. But still, the question is, my question is, do you remember, like, how the community center really started, or when you got involved with that community center on Hamilton Street?

Yeah, I really don't. It was, when I ended up being with RC: someone, I remember [00:54:00] hearing about this. How would I have heard about, I heard about it somehow. But by that time, I was in social services working at the Red Cross at that time, and they would have like, get-togethers, and parties, and come meet. And so I started going to those, and I think that's how I met Dixie, at that, and it was social; it was fun. It was a great way to get into the community and know the community, and because I hadn't been involved with the community, so I started to know people, and it just grew from there. And I quess it was at least a few years of that. And then, I'm trying to think why that, it started to dwindle before, the popularity of that. I think people were -- there were several clubs you could go to. You know, I think just people ran out of steam [00:55:00] for organizing. And then just when we're like comfortably thinking, oh well maybe we could close this down, AIDS hit. And so, we all, whether we were tired or not, we had to ramp it up, and the

rest is history, so to speak. Parties were over for a while, for sure.

LB: Yeah, that's for sure, yeah. And so, who, do you remember any of the people that were on the board then that were making those decisions, did you make those changes?

RC: I think Brian --

LB: Brian Marks?

RC: What'd you say?

LB: Brian - Brian Marks?

RC: Yes, Brian Marks, Markie, who I can't remember her last name. I think she was part of it. David Houseknecht, he was very instrumental in putting together -- he was sick, but he lasted for a few years, but he was right [00:56:00] there with all of it. Carl Manc- Carl.

LB: Yeah, Carl Mancino.

RC: Carl Mancino.

LB: He's still around, sure.

RC: Who I love, love, love. David Moyer, I mean, just folks like that that were, there were a couple of women too, I'm trying to think of. I can see them in my mind, but I can't remember their names. But, they're still around; I know that. Anyway, so it was not a large group of people towards the end, but it was at least a couple of dozen people who would show up for different things, until it

changed. But people that are still around, because now we're all old, but you know. I remember a lot of community center funds, and then we'd all go to the bars. So that was all that anybody had [00:57:00] at that point in time, you know, going to Stonewall, or Rosemary's, a couple of other places, Diamondz and things like that, so. That was our life, our community, until it got to be not so much fun and we had to work. (laughs)

LB: Yeah, although there were still people; I think the bars were really instrumental in making FACT happen, and --

RC: Oh, totally, absolutely.

LB: And there was quite a, they really rose to that occasion I think in a lot of ways in a positive way.

RC: Oh, they did indeed, and you know, I can't say enough.

Brian and I didn't always get along, but --

LB: You're all working for the same thing, though.

RC: Yeah I mean, but again, we both knew that we were fighting for the same cause. He'd give me the shirt off his back, and he knew I would do the same. So I think that was, you know, just sort of what the bottom line was for everybody. [00:58:00] But it was -- we were very vested in it, and I mean that in the way that, this really was our community, and we knew it. And we knew that if no one else was going to do something, and we knew that that was going to be the

case, we were going to do it. So you know, people, like I said, stepped away from lots of fun things, or were spending time doing things in their lives, and dedicated themselves to this, and that was no small feat for a lot of people. It think Scott Allen and so many wonderful -- Kit Hower, wonderful people who were involved.

LB: Yeah, I'm interviewing Scott on Thursday. (laughs)

RC: Oh, my love.

LB: I'll say hi to him for you. Yeah, he was enthusiastic about it, so. I think that [00:59:00] one of the things that happened was the changes with regards to medication and finally science was weighing in, and people were acknowledging that this was happening. But a lot of people have talked about the lack of response from society, and particularly elected officials. Were you aware and thinking about that then? I mean, what do you think about that?

RC: Oh my goodness, oh yeah, yeah. I mean, that was, you know, the politics that, I mean through my time at the Red Cross, I was very involved in different initiatives that involved politicians, you know? But you know, this was the time you have to remember that nobody even wanted to say the word HIV/AIDS, or gay, or any of that. You know, a politician would no more have said, you know, my lesbian friend here,

I mean, just, I remember when Clinton [01:00:00] said "lesbian" the first time on national television, I about fell off my chair, you know, I was so proud of him doing that. But no, nobody was talking about that.

LB: It's so amazing when you would take that tiny little thing, you know, that one little thing, can't you just do this, you know, that one thing.

RC: Yes, exactly. Say the word! You know, and again, I have to say that when, some of it shifted into other populations and things, it made it more palatable, if I can say that, and you know, fine. Whatever gets you on the wagon, get on the wagon, and we'll teach you more as we go, and that's what happened to a lot of people, that they learned to love some of the men, you know, just as friends and as -- you know. There was a lot of learning, and a lot of evolving that we got to see too. [01:01:00] And that was, I don't know how we would have done it without the whole community of people, honestly.

LB: Right.

RC: They saved lives.

LB: I remember one of the things that happened, you know, people would do fundraising. By, they wou-- I remember somebody calling me up here at one time, it was coming from the hospital, and they said that they wanted me to donate

money, because children had AIDS, and I said, okay, all right. Tell me more about this. And they said, well they're innocent victims. And I'm like, "Okay, what does that mean?" So they're innocent, huh?

RC: That wasn't one of our folks.

LB: I know, (laughter) I thought, this is not --

RC: Well I'll tell you, I was able to really raise some money.

LB: This is not coming from an LGBT organization.

RC: For those other communities, and it brought in a whole bunch of wonderful, I think of Anna Claudia and people like that who just became wonderful, wonderful partners in all of this, and [01:02:00] the Latino community just rallied, they really did. It was their family, and again, because so many gay people still were getting very ill, you couldn't not know someone, you know, even if you were in South Bethlehem Latino community and you never in your life for sure ever saw anybody gay except maybe your second cousin Ricky who was a little strange. But you know, they met through feeding people, and taking furniture. They met gay men, and gay women, and you know, it's again, in my mind, what community is really, really about. And you know, that was transforming, transforming, you know.

LB: Yeah, well that's pretty great. I think, when you were working on this, and you were talking about Dixie, were you

and Dixie [01:03:00] working, both working at the same time, or were you one and then the other?

She was our first hire. We hired her as the executive RC: director, and it was a small board; it was myself, and Brian, and a couple of other people. I'm so bad with names, that I can't remember. But there were several people, and we hired Dixie, and the Red Cross let me spend a lot of time helping her get that whole thing organized, and again, the piece that I did most of was out in the community, doing as much. I mean -- She was the, "Do we have enough rubber bands? How are the paper clips?" You know, "Here's the file folder," you know, all that kind of stuff, and organizing, a wonderful organizing ability that she has. And I was more the ideas person, or the person who would go out there and talk about it. Because I already had some credibility in the community. And so I could do that very quickly. And then, the guys were [01:04:00] raising money, and it was so crucial, and everybody was just doing as much as they could. But everybody had a niche of how they would be able to do it.

LB: Yeah, a lot of people had special skills that they were all bringing together.

RC: Even when I went on to work at Just Born, I was their community affairs person, I was able to take that message

about AIDS to people who hadn't heard a whole lot about it, to, you know, get their understanding and support. Then I had a lot of colleagues in different corporations, and that's one of the ways that we started really talking about it by then, and this was about ninety-five, ninety-six around that time, and being able to bring it to other places that hadn't previously really been involved. So it was just a spiderweb [01:05:00] of all kinds of connections.

LB: Yeah, everything coming together, yeah.

RC: Yeah, and that's how, I can guarantee that every grassroots cause has started the same way. Somebody knew somebody who knew somebody who knew somebody, you know, and thought they might have a truck, you know.

LB: (Laughs) That's true. Well, of course, with, when you talk about grassroots organizations, lots of different reasons spark it into place. When all of your friends are dying, you're really motivated in those situations, as opposed to just, you know, we need a new baseball field, or something down by the school, so.

RC: Absolutely. And we never knew who was next, that was the thing, because we had so little information about it. It was like, you know, you just never knew. We saw that women weren't particularly getting infected at that time, but

yet, we were -- we always had dental dams that we would give away and everything, [01:06:00] but you really didn't know who was going to be next.

LB: So do you want to talk a little bit about, you said a few things about COVID-19, but let's talk a little bit about that in relation to the AIDS epidemic. I mean, you know, #ItsNotOurFirstVirus, which is what people are saying. But I think that, one of the things that's pretty interesting about this is that, during the AIDS epidemic, during the height of the epidemic, those who were in the LGBT community were young; I mean, we were in our twenties and thirties, maybe in our forties at the end of the epidemic when it was at its height, and we were helping our friends. You know, it's pretty easy to do that when you're in your twenties, to really do a lot of that work. Now that we're aging, it's a little harder, where also not only do we have this COVID epidemic, but for that baby boomer generation, we also have the aging epidemic [01:07:00] which is a whole different circumstance. But you can, I mean, a lot of people have talked about the similars and the differences with regard to COVID and COVID-19 and HIV/AIDS, and you want to say some stuff about, how are you seeing that? Well, I think the first thing that strikes me about it, RC:

RC: Well, I think the first thing that strikes me about it, going to the politics of it all, is that like HIV/AIDS,

there was no recognition at the top. So we didn't have like a national focus on, "Hey, let's take care of this, together as a nation." Took a while, and I think the passage of Ryan White money was key, that there were some people in legislature who got it, and they got it usually because they had a child die, or they knew someone, and that's how all of that, you know. [01:08:00] So we had at least a framework within to work, and I think that's been, certainly one of the issues with COVID. Now what I think is a little different, or maybe it's not different, I don't know, but we learned everything medically and otherwise from each other and from people who had just had it. And I think now with the COVID, and I look at New York as a good example, New York State, as a good example of a place that really approached this in a pretty organized way, and a lot of the experience they had, I mean if you had half a brain, you could see that that was going to go other places, you know. Everybody was susceptible, and I think again, everything they were learning, as [01:09:00] they were doing, which was exactly what happened in the medical field and the service field with HIV/AIDS, you learned it as you got along, and then you know, researchers and folks like that were working on all of the stuff with HIV/AIDS pretty damn quick, and, but it took them a long time to get

anywhere, and so I have faith in the researchers working on the COVID as well, because I've experienced, you know, it can work. You know, there can be things that can change that whole paradigm. So I'm hopeful for that. But I think that not having the top political support has been a problem. But people, the thing that's very much the same is people are inventing themselves, and inventing how to approach this as they go along, and as they learned, and that helped, I hope everybody's sharing all that stuff. I know not all ears were open [01:10:00] to sharing it, but certainly in the medical field, they were there. And they continued to be there, and this has, I guess the advantage with HIV/AIDS epidemic is that we were close to the ground, and we, you know, so it wasn't, the bungling didn't happen close to the ground, you know? What happens close to the ground is usually pretty god damn good, and that's what's happening with the COVID, and that's the doctors and nurses and medical people and all the support people, and people who are working hard at that are doing an incredible job, just like they did back in the HIV/AIDS; there was no room for blunder, because people were dying right in front of you. So that's how I think every pandemic works in my mind. And I think, again, I think the best -- I think that New York State did a good job of wrapping its arms around,

and being the most infectious place [01:11:00] of course and trying to really pay attention; a lot of that was about communication and keeping, you know, people apprised of what was going on, which is so key. So I think that's been important. But you know, it's a mess; it's a mess, it never should have been like this. There were so many things. I have very little patience with people who don't wear a mask out in public; I mean, what the hell? This is a piece of cloth that can not only help you, but it can also help anybody else that you come in contact with. And you know, I've been known to be in stores, and someone without a mask comes very close, by going, "Hey, back up!" You know, because it's just ridiculous. So, I can get pretty pissed off about that. (laughs) But you know, it just, I don't [01:12:00] know what's the matter with people? What's the matter with our -- What's the matter with these people? I say it every time I see another Looney Toon kind of a thing, and lord knows there's plenty of opportunity for that. So, I think, you know, we're all learning, maybe on a different level. I was pretty impressed with a lot of people staying home. I think that was pretty incredible. And I think a lot of that is also about, people's workplaces that didn't want people there anymore. Yeah, and so that people could work from home; I

think that was a great advantage. And I also think, talking about baby boomers, I'm telling you, we changed the world, and we always have, and we always will. I don't care how old we are, frankly. But you know, the people, the first people who said, yeah, we're going to cozy up at home. I'm going to do a Costco run, get everything I need, and I'm not coming out for a couple months. That was [01:13:00] us baby boomers, thank you very much, you know. And we saved a lot of people from dying in that way. But then, the other craziness that was going on that we, you know, really didn't have a lot of affect with, like people opening up too soon, and stuff, you know, that stupid, stupid stuff that they're paying for now, you know.

LB: But don't you think a lot of that really boils down to leadership?

RC: Yeah.

LB: And so, and you can see that in everything you're talking about. You can see it in terms of, how you run the community center, it has to do with leadership, and people coming together, and a good board, and a good leader and stuff.

RC: Exactly.

LB: You have a state that has Andrew Cuomo as the leader, and it's totally different than a state that's saying, should we open, should we not? You know.

RC: Florida.

LB: Yeah, Florida's a good example, I mean, to just ignore reality --

RC: I know, the politics.

LB: -- if you have Reagan, who's just, [01:14:00] his response when somebody asked him about it for six or seven years, I mean, we're really six months into this -- into COVID-19.

When we talk about that big, the serious circumstance of HIV when it was really HIV/AIDS, which was really the killer time, it was eight years. So eight -- it took eight years --

RC: That's very true.

LB: -- for people to figure out, how are we going to keep people from dying? How do we keep, where is this coming from? It took eight years to figure this out. People are wanting COVID to be over now. And I think, for people who are minorities, because that's what the LGBT community is, we are more used to dealing with things not necessarily going our way just because we want them to, and you know.

RC: That's a good point, yeah. And you know, we're used to doing hard things. Because, everyday living [01:15:00] is

hard for members of our community. And it has been for a long time. And so, you kind of get used to that, and you also push back, which I think we do too; we push back as much as we can without getting killed. And I think that's why we probably have a lot of simpatico for all the racial justice things that are happening now. I mean, really, we're right there, (laughs) right there with that, because we get that; we get that. And like I said, you know, I just remember all of those years, and still being an advocate to today. I used to write on my resume that, "I had a head for business, and a heart of an advocate." I combined those two things, because you know, see what's going on. Makes me a little mad that I can't get out and march [01:16:00] anymore, you know. But, I would like to have been part of that. But physically, just decided that that was not -- I mean I could have marched, if my knees are good. But you know, it was just not good for the other thing; didn't want to risk getting anything. I have a daughter who has some real immune system issues, so we have to be very careful with her. So anyway, but I get it; I get it. Been there, done that. And yes, oh yes, let's do it again, if we need to do that. And I think it's amazing. I don't know about you, but I think what's happening right now is just amazing.

LB: Yeah, I do too.

RC: I think things are changing in a way that -- I really had hoped that I would live to see a woman as a president; that was my big dream. Still a Hillary fan. (laughs) But [01:17:00] to see some of these changes that are happening, I'm just so happy about it, like so, it's about fucking time.

LB: Well I think, you know, it's an interesting thing.

RC: I'm glad to be able to still be alive to see it.

LB: Yeah, I was talking to Maria Rodale yesterday, and she said, you know, we were talking about her brother and everything (inaudible).

RC: Oh, Ardath Rodale, oh my god, yes.

LB: Yeah, Ardath Rodale, the wonderful Ardath Rodale who was her mom, who was such an advocate. But one of the things Maria said was, which was brilliant I thought, was, you know, it's really the height of privilege to think that this is the absolute worst time ever. Because, you know, there have been horrible times in the last hundred years, and to suggest that, because we all have to stay home, and you know some people have lives -- yes, there have been -- it's very bad, but [01:18:00] you know, for many of us, it's not devastating. We're healthy; we're okay. We're

not at war, you know. They're not bombing our neighborhood. We're not marching --

RC: You know, and the privilege of being white, and being able to afford to have enough food, and a nice house, to you know, have to bundle up, and just have fun with, you know, your partner, or your husband, or your wife, and you know, that's not so bad. But yeah, you know, Liz, a lot of people don't have a clue; they just don't have a clue. I don't know how else to say it. And Maria was just absolutely correct, yeah. It's a first-world problem, I have to say.

LB: Really, really tough stuff and all of the things that we should be desperately concerned about. But one of the [01:19:00] first things she said was, we will get through this, because we've been through horrible other things, and you know, humanity will get through it, even if the worst stuff happens, we'll still get through it, because if you look back at the last hundred years, there have been incredible, horrible, horrible things. And people get through it, and they learn from it, and sometimes they don't pay attention. And then it goes (inaudible) --

RC: Well they know, and not that they forget, it's just that it hasn't been in front of their face for a while. So when something happens and it's right there again, it's like oh,

oh yeah, I kind of remember this feeling, you know. Oh, okay, good, we're glad you got it a second time. So yeah, you got to be open to learning, and I think there are a lot more people who are than aren't. At least I have to believe that, or frankly I couldn't get up in the morning.

LB: I know what you mean, yeah.

RC: So, [01:20:00] I really do believe in the good, and I wonder a lot about the not-so-good out there, and I'm absolutely waiting to vote, and I agree with whoever it was who said listen, people are going to crawl across broken glass on their knees to vote this idiot out, and I believe that that's true. (laughs)

LB: Well I hope so, and I've said that many times, so I really hope that that is the case, and that everybody feels that way. But I also, and I hope that, you know, thirty years from now when somebody sees this videos, and we're maybe not around anymore, that people will say, "Oh, everything turned out great." You know, and they'll know what's happened in the same way that we can look back at the HIV/AIDS crisis and say, it was a tragedy, but it was also a time of courage, and a time [01:21:00] where people really stepped up, and that there is not a cure for that; there's absolutely not a cure, but, and people still in some ways were kept from still being able to teach our

children how to not get diseases like this. But there's PrEP, and PEP, and those are really significant things and I'm beginning to see the dawn at the end of this epidemic which has been going on for such a long time. It's not over. I mean that's something Brian Marks says every time he speaks.

RC: No, it's not over, and I'll tell you, I think many a days, none of us could have seen this future, because it just didn't seem conceivable that anything would come and be able to really help. I mean, it was, we just never could see this day. We didn't -- Not that we didn't have the vision, but [01:22:00] we didn't have the hope. I think that was it; we really ran out of hope early on.

LB: At the beginning.

RC: And, yeah. But I'm happy to see that today, and, you know, there'll always be something. And there'll always be a time, this is for thirty years from now, by the way, there'll always be a time when you were called upon to stand and to show courage, and you know, you have a choice, you can do it, or you could just not do it, it's up to you. But you know, you got to live the rest of your life looking at yourself in the mirror, and you know, there are so many days I think back on my whole career and I think, oh crap, you know, I wish I could have done this, or I should have

done that better, or you know, I was always out on a limb, you know, with my big mouth, and stuff like that.

[01:23:00] But you know, I had to live to my truth. I had a really good friend who said to me, "Rose, can't you just go keep your head down, do your job, shut up," and I looked at her and I remember thinking, and saying, "No. I cannot." And that is the story of me, and a bunch of other people out there who showed up. And everybody will have that, at some time in their life, they'll be given that choice, to act or respond to it, certainly you respond to it, and you know, just the incredible center that you have there.

LB: Yeah, we're happy that that's working.

RC: It's incredible, and wonderful.

LB: And I'm so glad that you've been able to -- I mean -you've done, you can look back and say, a lot of things
wouldn't have gotten done had I not done it. I think that
[01:24:00] there are people when they're in positions of
leadership, you can look at a circumstance and say, well
this leadership, if there isn't that leadership, then
sometimes things don't happen, and I think you were really
instrumental in making a lot of these very significant
things happen at the height of the epidemic, and thank you
for doing that, because you saved people's lives, or made

people's lives better, and education certainly did that at then end of the time. Which was, I mean, that really was a question of, you know, this is what you can do to keep yourself from dying, and how essential that was at that time.

RC: That's very kind of you; thank you. And cheers to all those white-haired white women who went out with a banana and a cucumber and a, because that's what changed this world, their willingness and their matter-of-fact way of just saying, listen, this is how you put it on, and you need to put it on.

I do trainings all the time [01:25:00] now, that I used,
I'm comfortable using the word "penis" in huge groups of,
you know, and so, you know, I could just say that in any
situation. Any my younger self, I don't think I would ever
have thought, "Oh yeah, that's something you say in front
of loads of people all the time."

RC: They used to always carry their cucumbers with them. They were all ready, a small group, and just do it, god bless them all.

LB: Oh, that's hilarious. That's great. Well good for them.

I'm so glad you could come, and I'm so glad you could talk

about Dixie, because I'm so sad that we've lost her ability to tell all of those stories, but thank goodness she --

RC: She was instrumental. She was instrumental.

LB: Thank goodness she saved every single scrap of paper she ever touched. I don't think her heirs --

RC: Yeah, that was Dixie.

LB: Yeah, I don't think her heirs are saying that, now that they're clearing out her house. But they were able to rescue the papers.

RC: Yes, I'm sure. I think of her house and all the things that she's always had growing, and collecting, and [01:26:00] oh my gosh, that's, yeah. I don't envy them at all. She lived a life, for sure.

LB: Well they're coming to an end now, and I think that the great thing is that all that stuff that she saved is going to be archived, and this video is going to be archived, and so thank you so much for being on it. You got about three minutes to say anything else you want to say. Anything else?

RC: Well, like I said, just, you know, the Lehigh Valley is home to me, and I grew up there, and my dad was a radio personality and, yeah, and he was a minister, went from social ministry to radio, and he always was doing community things; he got that, way back in nineteen-fifty, whatever.

You know, he got that, and he would bring people along to form more community. And in the Lehigh Valley, he, when he died, quite young, [01:27:00] he, the whole funeral was about community members coming out and saying, "Hey, Vern Craig helped me with this, and he started this, and he went to people in the community and talked about mental health issues," just was there, and so I've seen that area, the Lehigh Valley grow in so many ways, and I'm so lucky to have been able to, be able to show up for my own community there, a place I loved and, you know, will always love and care about, so thank you, Lehigh Valley, for letting me be invited to the dance. (laughter)

LB: Well thank you, Rose, I really appreciate it very, very much.

RC: Thank you, Liz. And keep doing the great work you're doing.

LB: Thank you, have a great day, and keep you, keep up the good fight yourself. Okay, bye-bye.

RC: Thank you. Bye-bye.

END OF AUDIO FILE